

Adopt Ph 1800 to read as follows:

CHAPTER Ph 1800 LICENSED ADVANCED PHARMACY TECHNICIANS

PART Ph 1801 PURPOSE AND SCOPE

Ph 1801.01 Purpose. ~~[The provisions of this chapter shall apply to, and impose duties upon, all licensed advanced pharmacy technicians holding licenses issued by the board.]~~ **Utilization of a licensed advanced pharmacy technician is intended to increase the availability of the pharmacist for involvement in cognitive and patient care services.**

Ph1801.02 Scope. ~~[Utilization of a licensed advanced pharmacy technician is intended to increase the availability of the pharmacist for involvement in cognitive and patient care services.]~~ **The provisions of this chapter shall apply to, and impose duties upon, all licensed advanced pharmacy technicians holding licenses issued by the board.**

PART Ph 1802 DEFINITIONS

Ph 1802.01 Definitions. ~~[The following definitions shall apply:]~~

(a) “Drug preparation” means to prepare or approve a medication for dispensing when preparation is done according to manufacturer’s instructions provided in the current Federal Food and Drug approved package insert.

(b) “Licensed advanced pharmacy technician” means a person licensed by the board who:

(1) May perform all functions allowed by federal or state law and approved by the board, under the supervision of a licensed pharmacist who is physically on premises and holds an unrestricted license issued by the board~~[-];~~;

(2) May conduct product verification, process refills, verify repackaging of drugs, and perform other pharmacist tasks not required to be completed by a licensed pharmacist~~[-];~~;

(3) May perform duties allowed by either certified or registered pharmacy technicians~~[-];~~;

(4) Shall not interpret or evaluate a prescription or drug order, verify a compounded drug, or counsel or advise individuals related to the clinical use of a medication.

(c) “Product verification” means the physical act of validating the correct drug, strength, and form of the drug product being dispensed.

(d) “Verification error” means the dispensing of a prescribed medication that passes the product verification step with the incorrect drug, strength, or form.

PART Ph 1803 INITIAL LICENSE

Ph 1803.01 Initial Application for Pharmacy Technician.

Unclear/Legis. Intent: This form has not been provided to OLS Staff and has not been reviewed. Therefore, it is unclear if the rule and form are consistent.

Amended Conditional Approval Request – 6/27/2022 – 2

(a) The “**Licensed Advanced Pharmacy Technician Initial Application**” form PT-21 described in (d) below, for licensure to practice as an advanced pharmacy technician in the State of New Hampshire may be obtained from and shall be **completed and** submitted to the office of OPLC Office of Professional Licensure and Certification (OPLC), identified in Ph 103.03.

(b) An applicant for licensure as an advanced pharmacy technician shall meet the following requirements:

(1) Have worked 2,000 hours as a certified pharmacy technician in good standing, attested to by a NH licensed pharmacist(s) in good standing;

(2) Have successfully completed 4 advanced technician assessment based programs provided by a nationally recognized certification provider consisting of:

a. Two assessment based programs on product verification and immunization administration; ~~and~~

b. Two assessment based programs on any of the remaining assessment based programs; **and**

(3) **Have** [S]~~s~~uccessfully passed **a** jurisprudence exam approved by the board.

(c) A technician whose duties include product verification and who meets all of the qualifications listed in (b) above shall complete training on product verification:

(1) At the technician’s practice setting or when changing the technician’s practice setting with a licensed pharmacist~~[-];~~ and

(2) That includes the use of drug identification resources.

(d) Applicants for licensure shall submit:

(1) The **Licensed Advanced Pharmacy Technician Initial Application** form ~~[PT-21 shall]~~ containing the following:

a. Full legal name;

b. Date of birth;

c. Gender;

d. Residence address;

e. Mailing address;

f. Home or cell phone number;

g. Personal e-mail address;

h. Social security number, as required by RSA 161-B:11, VI-a;

Unclear/Legis. Intent: This form has not been provided to OLS Staff and has not been reviewed. Therefore, it is unclear if the rule and form are consistent. Also, Edit: place quotation marks around the form's title.

- i. Name of current employer including the mailing address, phone number, and e-mail address of the employment site;
- j. An indication as to whether or not the applicant has been convicted of a felony or admitted to sufficient facts to warrant such a finding, and if yes, an explanation of the circumstances surrounding such a finding or conviction;
- k. An indication as to whether the applicant has ever voluntarily surrendered for disciplinary reasons a license, registration, or certification to practice as a pharmacist or pharmacy technician in any jurisdiction and, if so, an explanation of such surrender;
- l. An attestation that the applicant has met the requirement for hours worked as a certified pharmacy technician set forth in (c) above; and
- m. The applicant's signature and date; and

(2) A fee of \$100 made payable to Treasurer, State of NH.

Ph 1803.02 Processing of Applications.

(a) If the board, after receiving and reviewing an ~~an [completed]~~ initial application and fee **the board** requires further information or documents **to complete the application to** determine the applicant's qualification for licensure, the board shall:

Edit: "and"

- (1) So notify the applicant in writing within 30 days; and
- (2) Specify the information or documents it requires.

(b) The board shall issue written approval or denial of an application within 60 days of the date that the application is complete.

(c) The board shall issue a denial of licensure if the board finds a violation of Ph 1805.01 **which would impair the applicants ability to practice.**

(d) The fee shall be non-refundable: **Edit: "applicant's"**

(e) Any applicant wishing to challenge the board's denial of an application for initial licensure shall:

- (1) Make a written request for a hearing of the applicant's challenge; and
- (2) Submit this request to the board:
 - a. Within 60 days of the board's notification of denial; or
 - b. If the applicant is on active military duty outside the United States, within 60 days of the applicant's return to the United States or release from duty, whichever occurs later.

PART Ph 1804 ONGOING REQUIREMENTS

Ph 1804.01 Reporting Changes.

(a) The person to whom a licensed advanced pharmacy technician license has been issued shall, within 15 days of change of residential address or location of employment, notify the board of such changes.

Edit: "(a)"

(b) The notice in a above shall contain:

- (1) The name of the licensee;
- (2) The address of the licensee including old and new, if applicable;
- (3) The license number;
- (4) The name of the pharmacy where employed including former and current, if applicable;
and
- (5) All new violations of;
 - a. State or federal law including convictions and fines; and
 - b. Disciplinary action taken against any registration, certification, or license including revocations for violation of pharmacy-related drug laws or regulations in this or any other state or jurisdiction.

(c) An advanced pharmacy technician shall maintain his or her national certification while licensed as an advanced pharmacy technician by the board.

(d) In the event a licensed advanced pharmacy technician loses certification, he or she shall notify the pharmacist-in-charge immediately and report to the board in writing within 15 days of the lapse of certification.

(e) The pharmacist-in-charge shall notify the board, in writing, within 15 calendar days after becoming aware that a licensed advanced pharmacy technician has adulterated, abused, stolen, or diverted drugs and include the name of the technician involved.

PART Ph 1805 REVOCATION, SUSPENSION AND OTHER SANCTIONS

Ph 1805.01 **Misconduct.** Misconduct shall be

Edit: "occur when"

Edit: Delete

(a) A~~ny~~ person ~~who performs~~ the functions or duties of a licensed advanced pharmacy technician without being licensed by the board~~[-];~~

Edit: Delete

(b) An~~y~~ advanced pharmacy technician ~~who~~ acts as a licensed advanced practice pharmacy technician without holding a current board approved technician certification, **described in Ph 1804.01(c),** in good standing~~[-];~~

Edit: Delete

Edit: Capitalize

(c) ~~That~~ the applicant, or licensee, has willfully violated any of the provisions of RSA 318, RSA 318-B or the board's rules;

- Edit: Delete** (d) **Edit: Capitalize** That the applicant has been convicted of any felony or misdemeanor resulting from a violation of any federal, state, or local drug or pharmacy-related law, rule or regulation;
- Edit: Delete** (e) **Edit: Capitalize** That the applicant has attempted to obtain a licensed advanced pharmacy technician or pharmacy technician registration by fraudulent means;
- Edit: Delete** (f) **Edit: Capitalize** That the applicant is unable to engage in the performance of advanced pharmacy technician or certified pharmacy technician functions with reasonable skill and safety by reason of illness, inebriation, misuse of drugs, narcotics, alcohol, chemicals, or any other substance, or as a result of any mental or physical condition;
- (g) **Edit: "There is a"** The suspension, revocation, or probation by another state of the applicant's license, permit, or registration to practice as a pharmacy technician;
- Edit: Delete** (h) **Edit: Capitalize** That the applicant **Edit: "refuses"** refused to appear before the board after having been ordered to do so in writing; or
- Edit: Delete** (i) **Edit: Capitalize** That the applicant **Edit: "makes"** made any fraudulent or untrue statement to the board.

Ph 1805.02 Revocation, Suspension, or Nonrenewal of National Certification.

(a) Upon the revocation, suspension, or nonrenewal of the advanced pharmacy technician's national certification the advanced pharmacy technician shall notify the board within 15 days of that action by the national certifying body.

(b) The board upon notification by the advanced pharmacy technician of the revocation, suspension, or nonrenewal of the national certification shall issue a notice of hearing.

Ph 1805.03 Disciplinary Action and Sanctions. The board shall follow Ph 2207 when initiating disciplinary actions action against a licensee or imposing sanctions against a licensee who violates any of the provisions listed in Ph 1805.01

PART Ph 1806 RENEWAL OF LICENSES

Ph 1806.01 Renewal License Required. All advanced practice pharmacy technician licenses shall expire biennially on March 31st in even numbered years.

Ph 1806.02 Renewal Application Where Obtained and Filed. Applications for the renewal of a license for an advanced practice pharmacy technician may be obtained from, and shall be **completed and** filed with OPLC, identified in Ph 103.03.

Ph 1806.03 Renewal Application Contents and When Filed. Renewal applications shall be filed with the board in accordance with the following:

(a) Applications for renewal of a licensed advanced practice pharmacy technician shall ~~be made on~~ **complete and submit a "Licensed Advanced Pharmacy Technician Renewal Form" PT-22 revised [November 2020.] revised June 2022;**

(b) The competed application form and the \$100 renewal fee shall be filed with the board no later than March 31st[-];

Unclear/Edit: The form's edition date should be the month of JLCAR approval.

Edit: Use plural if using "their".
"All licensed...technicians"

(c) Incomplete renewal applications shall not be renewed until ~~[all required]~~ **the application has been completed, the fee has been paid, and all** documentation **required by the application** has been submitted is submitted to show compliance with all the renewal requirements set forth in Ph 1806[-]; **and**

(d) Renewal applicants whose licenses have lapsed shall not practice as an advanced pharmacy technician until their licenses have been reinstated by the board pursuant to RSA 318:26.

Ph 1806.04 Continuing Education Requirements for Licensed Advanced Pharmacy Technician.

(a) ~~[The board shall not issue license renewals unless the licensed advanced pharmacy technician indicates on the renewal application, and under the penalty for unsworn falsification, that he or she has completed the minimum required hours of accredited or approved continuing pharmaceutical education courses or programs according to Ph 1806.04.]~~ **The licensed advanced pharmacy technician shall maintain their national certified status and stay up to date with all continuing education required by such certification demands.**

~~[(b)]~~ Continuing education shall be required of all licensed active or inactive licensed advanced pharmacy technicians who apply for licensure renewal.]

~~[(e)]~~**(b)** Licensed advanced pharmacy technicians with duties involving sterile and non-sterile compounding shall complete a minimum of 0.4 CEU[²]s ACPE approved, 0.2 CEU[²]s in each calendar year, in the area of compounding or other competencies determined by the board.

~~[(d)]~~**(c)** Continuing education credits shall not be recognized for any repeat program attended or completed. Repeat programs shall be identified as any program didactic or correspondence which carries the same ACPET, CME or any board of pharmacy program identification number.

~~[(e)]~~**(d)** The licensed advanced pharmacy technician shall retain all certificates or other documented evidence of participation in an approved or accredited continuing education program or course for a period of 4 years. Such documentation shall be made available to the board for random audit or verification.

~~[(f)]~~**(e)** Not less than 10% of the registrants shall be randomly selected each year by the board for determinations of compliance with Ph 1806.04.

Edit: delete apostrophe

Ph 1806.05 Excess CEU's. Excess CEU's earned in one licensure period shall not be carried forward into the new licensure period for the purpose of fulfilling that year's continuing education prerequisite for licensure renewal.

Edit: delete apostrophe

Ph 1807 Reinstatement of a Suspended, Revoked, Voluntarily Surrendered, or Lapsed License.

1807.01 Reinstatement. An advanced pharmacy technician whose license to practice in this state has been suspended, revoked, voluntarily surrendered, or allowed to lapse shall:

(a) File a reinstatement application with the board which shall include at the following:

(1) Name, address, and telephone number of the applicant;

(2) Date of birth; and

Edit: "PART Ph 1807 REINSTATEMENT OF A SUSPENDED, REVOKED, VOLUNTARILY SURRENDERED, OR LAPSED LICENSE"

(3) Current employment information;

(b) Pay the reinstatement fee of \$200;

(c) Submit certificates of attendance or participation in accredited with approved continuing advanced pharmacy education courses or programs for a minimum of 15 hours, of which at least 5 hours shall be earned in a live setting. All such continuing education shall have been earned in the period 24 months immediately preceding the date of application for reinstatement;

(d) If the advanced pharmacy technician has not held a license to practice in this state for a period of 2 years or more provide:

Edit: Remove highlighting

(1) A notarized affidavit(s) documenting the pharmacist's pharmacy experience during the 2 years immediately preceding the date of his or her application for reinstatement;

(2) Proof of status of licensure in all states that the pharmacist has been or is currently licensed in; and

(3) ~~[Complete and pass with a minimum of 80% an exam described in Ph 1803.01(b)(3) to assess the knowledge of the candidate in regard to their responsibilities as licensed advanced pharmacy technicians]~~ Have successfully passed a jurisprudence exam approved by the board; and

Unclear: What exam is this? Does it have a name? This could allow for oral rulemaking in violation of RSA 541-A:

(f) If the advanced pharmacy technician has not held a license to practice pharmacy in this state for a period of 5 years or more and has not practiced in any other state, complete a practice internship no less than 160 hours in duration prior to reinstatement.

PART Ph 180[7]8 LICENSED ADVANCED PHARMACY TECHNICIANS – STANDARDS OF PRACTICE

Ph 180[7]8.01 Responsibilities. Persons subject to these rules shall comply with the following:

~~[(a) The permit holder and pharmacist_in_charge shall identify qualified licensed advanced pharmacy technicians and ensure that such persons meet all the qualifications required and are licensed with the board as licensed advanced pharmacy technicians before performing the duties of a licensed advanced pharmacy technician;]~~

~~[(b)](a)~~ Perform all functions under the supervision of a licensed pharmacist who is physically on premises and holds an unrestricted license issued by the board;

~~[(c)](b)~~ All licensed advanced pharmacy technicians shall wear a name tag, identifying them as a “Licensed Advanced Pharmacy Technician”; and

~~[(d)](c)~~ All licensed advanced pharmacy technicians shall maintain national certification ~~[provided by a board approved organization]~~ as a certified pharmacy technician.

Ph 180[7]8.02 Licensed Advanced Pharmacy Technician’s Duties.

(a) In addition to all the duties performed by a New Hampshire certified pharmacy technician, licensed advanced pharmacy technician duties shall include, but not limited to:

- (1) Product verification; and
- (2) Approval of drug preparation.

(b) A licensed advanced pharmacy technician with duties involving sterile and non-sterile compounding shall have completed a training program jointly accredited by the American Society for Hospital Pharmacists and the Accreditation Council for Pharmacy Education (ASHP/ACPE) before performing those tasks.

(c) Licensed advanced pharmacy technician duties shall not include:

- (1) The interpretation or evaluation of a prescription or drug order;
- (2) Verification of a compounded drug;
- (3) Counseling or advis[e]ing individuals related to the clinical use of a medication;
- (4) Duties that require clinical knowledge, training, or judgement;
- (5) Duties outside their scope of training or education; and
- (6) Any duty that a federal or state law or regulation requires a pharmacist to perform.

PART Ph 180[8]9 ADVANCED PHARMACY TCHNICIAN ADMINISTRATION OF VACCINES, QUALIFICATIONS, AND APPLICATION

Ph 180[8]9.01 Qualifications.

(a) A New Hampshire licensed advanced pharmacy technician who seeks to engage in the administration of vaccines shall meet the requirements of[?] **RSA 318:16-b.**

- ~~[(1) RSA 318:16 b, I, relative to education or experience;~~
- ~~(2) RSA 318:16 b, II, relative to professional liability insurance coverage; and~~
- ~~(3) RSA 318:16 b, III, relative to completion of continuing education.]~~

(b) An advanced pharmacy technician who seeks to engage in the administration of vaccines shall hold current basic or higher certification in cardiopulmonary resuscitation (CPR) from the American Heart Association, the American Red Cross, or from another organization or entity that is nationally-recognized as an issuer of such certifications.

(c) An advanced pharmacy technician shall not delegate the administration of the influenza and COVID-19 vaccine to any person.

Ph 180[8]9.02 Application.

(a) An advanced pharmacy technician who seeks to engage in the administration of influenza and COVID-19 vaccines, if available, to the general public shall file a completed “Pharmacist and Advanced Pharmacy Technician **Application to** Administ[rati]on [er [of] Vaccines [Application]” [(August 2021)] **revised 6/2022.**

Unclear: The form's edition date should be the month of JLCAR approval.

(b) An application fee of \$25.00 shall be included with the application required by (a) above.

Ph 180[8]**9.03** Required Documents. The following documents shall be filed with the application described in Ph 1808.02(a):

(a) Proof of possession of at least \$1,000,000 of professional liability insurance coverage; and

(b) Proof of having completed training specific to administration of the respective vaccines that includes:

(1) Programs jointly approved by the American Society for Hospital Pharmacist (ASHP) and the Accreditation Council for Pharmacy Education (ACPE);

(2) Curriculum-based programs from an ASHP/ACPE-accredited college of pharmacy;

(3) State or local health department programs; or

(4) Programs recognized by the board **continuing education advisory council as required by Ph 403.12.**

Ph 180[8]**9.04** Vaccine Administration Requirements. An advanced pharmacy technician who engages in the administration of influenza and COVID-19 vaccines shall comply with the following procedures:

(a) The advanced pharmacy technician shall be under the supervision of an on-site immunizing pharmacist;

~~[(a)]~~**(b)** Provide the patient with a Vaccine Information Statement (VIS) as provided by the Centers for Disease Control (CDC);

~~[(b)]~~**(c)** Ensure that the patient has received and signed the Patient Consent Form and has been counseled and his or her questions answered prior to administration of the vaccine;

~~[(c)]~~**(d)** Maintain and follow written policies and procedures that establish a course of action~~[-the pharmacist shall follow to address]:~~

(1) Adverse reactions;

(2) Anaphylactic reactions including a standard order for treatment;

(3) Accidental needle sticks; and

(4) Handling or disposal of used or contaminated equipment and supplies;

~~[(d)]~~**(e)** Report all adverse events to the Vaccine Adverse Events Reporting System (VAERS) and to the primary care physician if applicable;

~~[(e)]~~**(f)** Provide the patient with documentation of the vaccination and when appropriate report it to the immunization administration section of the New Hampshire department of health and human services to be added to the Vaccination Registry~~[-];~~

~~[(f)]~~**(g)** Provide notice electronically, in writing or **by** fax ~~[by]~~ within 30 days to the primary care provider, when the practitioner has been designated by the patient, of the administration of the pneumococcal and varicella zoster vaccine and maintain documentation of the record for a minimum of 4 years; and

~~[(g)]~~**(h)** Be able to recognize anaphylaxis and maintain at least 2 doses of injectable epinephrine at all times to treat a reaction if it occurs.

Ph 180~~[8]~~**9.05** Recordkeeping. An advanced pharmacy technician who engages in the administration of vaccines shall, for a minimum of 4 years, keep a patient consent form that includes the:

- (a) Name and date of birth of the patient;
- (b) Name of the vaccine, manufacturer, lot number, and expiration date of the vaccine;
- (c) Description of the risks and possible side effects of the vaccine;
- (d) Date of administration;
- (e) ~~[Administering]~~ **Supervising** pharmacist's name; ~~[and]~~

(f) Administering licensed pharmacy technicians name; and

~~[(f)]~~**(g)** Signature of the patient.

~~[Ph 1808.06 Reinstatement. An advanced pharmacy technician whose license to practice in this state has been suspended, revoked, voluntarily surrendered or allowed to lapse shall be subject to the following requirements:~~

~~—— (a) File a reinstatement application with the board which shall include at the following:~~

- ~~(1) Name, address, and telephone number of the applicant;~~
- ~~(2) Date of birth; and~~
- ~~(3) Current employment information.~~

~~—— (b) Pay the reinstatement fee of \$200;~~

~~—— (c) Submit certificates of attendance or participation in accredited with approved continuing advanced pharmacy education courses or programs for a minimum of 15 hours, of which at least 5 hours shall be earned in a live setting. All such continuing education shall have been earned in the period 24 months immediately preceding the date of application for reinstatement;~~

~~—— (d) If the advanced pharmacy technician has not held a license to practice in this state for a period of 2 years or more, the applicant shall provide:~~

- ~~(1) Notarized affidavit(s) documenting the pharmacist's pharmacy experience during the 2 years immediately preceding the date of his or her application for reinstatement; and~~

~~(2) Proof of status of licensure in all states that the pharmacist has been or is currently licensed in; and~~

~~(3) Complete and pass with a minimum of 80% an exam designed by the board to assess the knowledge of the candidate in regard to their responsibilities as licensed advanced pharmacy technicians.~~

~~—— (f) If the advanced pharmacy technician has not held a license to practice pharmacy in this state for a period of 5 years or more and has not practiced in any other state, the board shall require the completion of a period of practice internship prior to reinstatement.]~~

Edit: Update appendix to reflect renumbering of rule.

APPENDIX

Rule	Specific State Statute the Rule Implements
Ph 1801	RSA 318:5-a, IV-a, X, XIV; RSA 318:15-a and c
Ph 1802	RSA 318:1, XXXIII; RSA 318:5-a, IV-a, X, XIV; RSA 318:15-a and c
Ph 1803	RSA 318:5-a, II, IV; RSA 318:5-a, X(a)
Ph 1804	RSA 318:5-a, X(b); RSA 318:15-a
Ph 1805	RSA 318:5-a, X(d)
Ph 1806	RSA 318:5-a, X(f)
Ph 1807	RSA 318:5-a, XI(c)