SD Board of Pharmacy Meeting Minutes
Friday, June 24, 2022, 8 am
South Dakota Board of Pharmacy Conference Room
4001 W. Valhalla Blvd Suite 202, Sioux Falls, SD 57106

Members of the Board in Attendance: President Dan Somsen, Ashley Hansen, Cheri Kraemer, Tom Nelson, and Curt Rising

Board Staff in Attendance: Executive Director Kari Shanard-Koenders; PDMP Director Melissa DeNoon, Inspectors Tyler Laetsch, Carol Smith, and Lee Cordell; and Secretary Beth Windschitl.

Others in Attendance: Joe Bergsmith (Walmart); Jessica Strobl (Lewis, SDPhA); Michelle Aytay (Walgreen); Eric Brandt (U of MN P4 student); Bill Ladwig (Lewis); Alyssa Larson (SDSHP); Maimuna Bruce Uzzell (Cardinal Health); Catherine Ronalder (Cardinal Health); Lori Ollerich (Pharmacy Specialties); Dan Hansen (SDSU); Jessica Adams (Cardinal Health); Michele Kooiman (Monument Health); Jace Muramoto (Continued Care LTC Pharmacy); Carli Krogman (SDSU P4 student); Amanda Bacon (SDPhA); Shannon Katz (SDSU P4 student); Justin Manning (Vivid Clear Rx); Rhea Kontos (Secretary);

A.   Call to Order and Introductions

Dan Somsen called the meeting to order at 8:04 am, welcomed attendees, and read the mission statement. Member Somsen called the roll. A quorum was present. Attendee introductions completed.

B.   Public Comment

Floor was opened for public comment; none received.

C.   Consent Agenda

Consent agenda was presented. No items were removed. A motion was made to approve the consent agenda (Hansen/Kraemer/Pass.)

D.   Staff Reports

1.   Operations Report – Kari Shanard-Koenders

a.   Bob Coolidge, Licensure and Certification employee who managed the Controlled Substance Registrations (CSR) for the Department of Health (DOH), has retired. Over the years, the board has requested CSR to move to its purview. Monies generated from CSR fees are the logical choice to assist with funding the Prescription Drug Monitoring Program. Request determination falls to Joan Adam, DOH Cabinet Secretary.

b.   The FDA recently approved both Moderna and Pfizer COVID-19 vaccines for children 6 months – 3 years of age. Prior to the PREP ACT, board policy allowed vaccination by prescription or protocol. With the FDA change, board policy review is advised. Bill Ladwig stated pharmacists are looking to the board for guidance and direction due to liability and patient safety concerns. The Board decided to add this as an agenda item to New Business.

    c.   The donated repository drug program becomes law on July 1, 2022, after passing in the 2022 legislature. A preliminary draft of program rules was sent to DOH. The board continues to work with providers to obtain drug lists for its database and talk with Medicaid regarding zero cost billing.

    d.   Renewal application processing for full-time, part-time, and nonresident license holders ends June 30th.

    e.   Research into an emeritus license option for pharmacists has not been completed.

2. Inspector Reports

Carol Smith reported she worked on an article for the July Board of Pharmacy quarterly newsletter, completed an NABP program review and training webinar, and continues to work on her sterile compounding recertification online. The most common inspection deficiency was biennial inventory documentation. Several pharmacies, in Carol's inspection area, are looking for part-time, full-time, and relief pharmacists.

Lee Cordell reported he begins initial sterile compounding training for inspectors in July through Critical Point. During inspections he identified pharmacies missing mandatory sign postings and observed a bottle containing a C2 drug purposefully left in an accessible area as a "decoy" for drug seeker access should a robbery situation arrive during an inspection. DEA policy requires C2 drugs be locked up. During a CVS inspection, inspector observed technicians bagging drugs without pharmacist final visualization. Pharmacist never sees what is in the bag, never sees the stock bottle / vial, method creates room for errors, allows for the addition of other items to bag, and exposes pharmacist to potential liability. Last year, the board granted CVS a workflow variance which requires further review and potential modification given inspector's recent findings.

Tyler Laetsch reported fielding questions regarding immunizing technicians and their role after the PREP ACT ends, a decrease in COVID testing, and noted the FDA approved additions to the commercially available product list. Under the 503A standard definition, a pharmacy cannot compound a product that is FDA approved and commercially available. A pharmacy must provide a specific reason why a patient cannot use a commercial version before compounding. The FDA does not consider cost a valid reason. Inspector also reported pharmacy service hour changes at select chain locations. Inconsistency in hours has caused confusion for patients who cannot get their meds or have them sent elsewhere. Consistent hours of operation across all chain locations helps patient care. Inspector continues his work on PDMP pharmacy audits to identify entities not reporting prescriptions correctly to PDMP, during the last quarter we have found three pharmacies not reporting schedule five prescriptions.

3. PDMP Report

Melissa DeNoon gave an update on continuing efforts to improve PDMP database quality and integrity. Two main areas of concern: prescriptions with missing information resulting in data not making it into the database and identifying inaccurate prescriptions in the database and correcting them. An audit of PDMP reporting to identify pharmacies not submitting C5 prescriptions and incorrect DEA numbers attached to dispensed drugs is underway. The BJA 2021 Grant funds which were awarded to the board in November have not been received. BJA's continual criteria and eligibility changes after the fact hampers recipients' efforts to maintain their PDMP programs and pay vendors. The need to identify an independent funding source for PDMP is urgent. Melissa gave a brief synopsis of the topics and learnings from attending the APhA Institute on Substance Use Disorder conference. See handout for a listing of presentations given, events attended, and upcoming events.

E. Complaints, Investigations, Disciplinary Actions, Loss/Theft Reports
    Inspection Laetsch discussed

    1. Complaint 2022-0005   Emergency script procedure for C2
    2. Complaint 2022-0006   Vaccination of Minor

3. Complaint 2022-0007   HIPPA
4. Complaint 2022-0008   Medication fill error
5. Complaint 2022-0009   Diversion
6. DEA FORM 106 – Sanford Vermillion
7. DEA FORM 106 – Safeway Mt. Rushmore Rd.
8. DEA FORM 106 – Safeway Mt. Rushmore Rd. – Resolved
9. DEA FORM 106 – Landmann Jungman Memorial Hospital

F.   SD Pharmacists Association – Amanda Bacon, Executive Director

1.   Activity Report

Per Amanda Bacon, all SDPhA district meetings are completed. At the SDPhA board retreat June 3-4, 2022, discussions focused on strategic planning, legislative goals, CE, and agenda items for the annual meeting. The SDPhA annual meeting will be in person in Brookings, SD September 9-10, 2022, with a special reception planned for Thursday or Friday evening in conjunction with SDSU. Work on PBM state and national initiatives for 2023 have begun; to assist with these efforts, SDPhA has retained Craig Matson, Roger Tellinghuisen, Bob Riter, and Linsey Riter-Rapp. Amanda emphasized the increasing importance of C&L funds in the lobbying process, and a potential phone-a-thon campaign to raise additional C&L funds in the future. For addition information regarding SDPhA activities and initiatives refer to handout.

2.   Financial Report – not discussed, see handout

3.   Funding Discussion SDCL 36-11-6

A brief discussion of SDCL 36-11-6 occurred. To avoid the appearance of a conflict of interest, board members review SDPhA funding annually at the June board meeting and a vote is taken. A motion was made   to approve funding SDPhA at 80% of the annual pharmacist license renewal fees received by the board (Kraemer/Rising/Pass.)

G.   Other Reports

1.   SDSU College of Pharmacy – Dan Hansen, Pharm.D., Dean and Professor

The Class of 2022 graduated 74 Pharm.D. students with 32 matched to PGY1 residency programs. SDSU's match rate remain strong at 71%. Working with the Board to plan the 85th Annual NABP/AACP District V meeting in Custer State Park with a good showing of faculty attending. The Pharm.D. accreditation on-site visit is scheduled for October 18th – 20th. The self-study document was approved at the May faculty meeting. New additions to staff and faculty include Brooke Merry, recruitment and outreach coordinator and Hiruni Amarasekara, project manager/population health instructor for the Community Practice Innovation Center in the Department of Allied and Population Health. Recent faculty, staff and student achievements/recognition include Dr. Brad Laible being named the college's associate dean for academic programs, Dr. Hemachand Tummala named department head of pharmaceutical sciences, and the selection of Bill Ladwig as the college's alumni of the year.

2.   SD Society of Health System Pharmacists (SDSHP) – Alyssa Larson, Pharm.D., SDSHP President

SDSHP Meeting Updates - The annual meeting was held virtually on April 8th-9th, 2022. Next year's meeting is scheduled for March 31st through April 1st and in person. The strategic plan for 2022-23 was approved by SDSHP's Board of Directors in May. Upcoming events include the Annual Residency Conference July 11th at

Arrowwood Cedar Shore Resort in Oacoma, and the 20th Annual GVR Open Golf tournament July 22nd at Central Valley Golf course in Hartford.

3. SD Association of Pharmacy Technicians (SDAPT) – John Thorns, CPhT (not in attendance/no report)

H. A motion was made to go into executive session for the purpose of contract discussions (Kraemer/Hansen/Pass).

A motion was made to come out of executive session and resume the board meeting (Nelson/Hansen/Pass.)

I. Old Business

1. Legal Counsel

A motion was made to draft a letter to the Secretary of Health regarding future attorney representation for the Board of Pharmacy (Kraemer/Hansen/Pass.)

2. Drug Repository Rules 20:51:35

Shanard-Koenders asks the board for approval to move forward with the rules writing process for the drug repository. We are required by the legislature to complete the rules; a draft was sent to board members. There will be many revisions throughout the process. A motion was made to move forward with the drug repository rules development process as required by HB1086 (Nelson/Kraemer/Pass.)

J. New Business

1. Monument Health/Cardinal Central Fill – Michele Kooiman, Pharm.D., Monument Health, Jessica Adams, Pharm.D., Cardinal Health, Catherine Ronalder, Pharm. D., Cardinal Health

Michele Kooiman came before the board to request a waiver to rule 20:51:20:04 (use of common electronic database). The rule requires that a common database be utilized by two or more pharmacies license by the board to practice pharmacy and applies to central fill services. Monument Home + Pharmacy in Spearfish wishes to engage Sonexus Health, a pharmacy owned Cardinal Health in Texas, to provide central fill services which consist of primarily unit dose packaging. Offering a central fill option will enable Monument to expand service offerings to patients. Processing details, i.e., data entry, date review, and adjudication, are discussed in the handout. Because a commonly shared database between the parties does not exist, a waiver is required so Monument and Sonexus can utilize technology that permits the sharing of information needed to safely process, fill, and dispense prescriptions. Monument would like their waiver request to cover their location at 353 Fairmont Blvd. in Rapid City (SD license 100-1986). A motion was made to grant Monument Health a waiver to chapter 20:51:21:04 for a period of one year (Nelson/Hansen/Pass.)

2. Continued Care LTC (CC LTC) Pharmacy e-kit quantities variance request – Jace Muramoto, Pharm.D.

Jace Muramoto came before the board to request a waiver to rules 20:51:15:26 and 44:73:08:11 to better supply readily available medications to remote skilled nursing facility residents served by CC LTC. CC is a new long-term care pharmacy in South Dakota going live July 1, 2022. CC LTC uses the same Nexsys automated dispensing cabinets in facilities in five states. Both the pharmacy and the nursing home management can track and monitor any transactions in real time or pull reports after a transaction is completed. The machine requires a unique credential login for each user and every transaction and is electronically time stamped to link to the user pulling the medication. Controlled substance mediations are stored in individual cells and require dual control (two nurses to login to access medication). All medications supplied will have minimum and

maximum stock on hand to ensure sufficient quantities to meet residents' needs. Machine medication audits occur monthly. Refer to handout for additional information. A motion was made to grant a one-year variance to rules 20:51:15:15 and 44:73:08:11 to allow CC LTC Pharmacy e-kits to contain 189 legend drugs and 25 controlled substances stocked in the Nexsys ADT machine per the quantities provided on the drug list (Nelson/Hansen/Pass.)

3. Vaccination Administration for Infants (Agenda Addition)

As discussed in the Operations Report, Shanard-Koenders suggested board issue a policy statement on this topic. President Somsen asked for how to address this. It was discussed that due to no liability in the PREP Act for administration to children under the age of three years, as well as the extra time and effort to administer vaccinations to infants, to limit pharmacist vaccine administration to children at least three years of age. This may impact patients who need a vaccine and either do not have or cannot afford to go a physician; however, there will be pediatric vaccine clinics offered at some hospitals. Discussion ensued if the PREP Act is amended to add infant vaccinations, do we stay with the age parameters of the policy statement? Technically, the policy statement may be rescinded at any Board Meeting. Should the situation arise, the board can issue a strong recommendation to limit pharmacist administered vaccination to individuals three years of age and older due to safety and comfort of pharmacists in administration to this age group.

A motion was made for the board to draft a policy statement on pediatric immunizations to align with the PREP Act, patient safety, and pharmacist comfort with immunizing infants to state that pharmacists should not immunize individuals younger than three years of age (Hansen/Kraemer/Pass.)

K. Other Business

1. Recent Meeting News
    a. SDSHP 46th Annual Conference, April 8-9, 2022, virtual
    b. 118th NAPB Annual Meeting - May 19-21, 2022, Sheraton Wild Horse Pass, Phoenix

Member Hansen spoke on the Annual Meeting. She attended along with Member Kraemer, Inspector Laetsch, and ED Shanard-Koenders. Presentations included the state of the wellbeing of pharmacists/technician in the workplace with boards of pharmacies soliciting wellness information from pharmacists/technician via surveys. Should the board develop a survey tool to gather wellness information pertinent to South Dakota pharmacists/technicians? Member Hansen also shared that there are currently 13 technicians servicing on boards of pharmacy in 12 states. To promote technicians within the profession, Member Hansen encouraged the board to consider appointing a pharmacy technician to the board as technicians are a part of the team, are governed by Board laws and rules, and deserve to have a voice at the table. It would require a statute change and opening the Practice Act but could be done in the 2023 Legislative session. Board staff will work with DOH to determine feasibility.

Member Kraemer also attended and spoke to the fact that several boards are increasing their level of investigation into pharmacy errors. South Dakota does not require error reporting. Error reporting should not be punitive but should be constructive and a learning tool with root cause analysis. Access to error data from chains is barred due to Patient Safety Organization affiliations and a claim that they are proprietary. Additional hurdles to reporting errors includes a lack of standardization. Every pharmacy defines errors differently and there are no common definitions of errors that all use, so there are many variables to track them.

2. Future Board Meeting Dates – all held in Sioux Falls Board Room unless otherwise noted
    a. September 8, 2022, 1pm – 5pm CDT in coordination with SDPHA 136th Annual Convention in Brookings (location TBD)

  b. December 9, 2022, 9am – 1pm CST
  d. March 30, 2023, Sioux Falls, 1pm – 5pm CDT in conjunction with SDSHP Annual Meeting, Sioux Falls
  e. June 23, 2023, Sioux Falls, 8am – 12pm CDT

 3. Upcoming Meetings
  a. NABP/AACP 85th Annual District V Meeting, August 3-5, 2022, Custer State Park
  b. 136th SDPHA Annual Meeting September 9-10, 2022, Brookings
  c. SDSHP 47th Annual Conference, March 31 – April 1, 2023, Sioux Falls

L. Adjourn

 A motion was made to adjourn (Hansen/Kraemer/Pass.) Meeting adjourned at 12:13 pm CST

PHARMACISTS   2086 Current Total   19 New Licensees for period

License#	Last Name	First Name	City	State
6933	Gray	Natalie	Sioux Falls	SD
6932	Steckelberg	Jacob	Sioux Falls	SD
6931	Kading	Mary	Huntington Beach	CA
R-6930	Gottier	Vanessa	Albion	NE
6929	Wagner	Kasey	Sioux Falls	SD
R-6928	Lorenz	Luke	St. Louis Park	MN
R-6926	Fasbender	Clarissa	Chicago	IL
R-6927	Vietor	Holly	Gillette	WY
R-6925	Patel	Vishal	Des Plaines	IL
R-6924	Perkins	Kayley	Sioux City	IA
6923	Huffman	Sara	Hillsboro	OR
R-6922	Fathman	Anna	Florence	KY
6921	Ford	Khalil	Webster	TX
R-6920	Wright	Natalie	Hot Springs	SD
R-6919	Lapke	Aerial	Sioux City	IA
R-6918	Shin	Caroline	Naperville	IL
R-6917	Adelakun	Tosin	West Columbia	SC
R-6916	Reed	April	Gilbert	SC
R-6915	Kadakia	Vaibhav	Woodridge	IL

FULL-TIME PHARMACY PERMITS   238 Current Total   3 New FT Permits for period

License#	Business	City	State
100-2081	LEWIS FAMILY DRUG, LLC	Harrisburg	SD
100-2080	Avera St. Luke's	Aberdeen	SD
100-2079	Avera McKennan	Aberdeen	SD

PART-TIME PHARMACY PERMITS   77 Current Total   0 New PT Permits for period

PHARMACY INTERNS   314 Current Total   10 New Registrations for period

TECHNICIAN REGISTRATIONS   1477 Current Total   75 New Registrations for period

NON-RESIDENT PERMITS   843 Current Total   24 New NR Permits for period

WHOLESALE PERMITS   1296 Current Total   39 New WH Permits for period

Activity Reports	New	Renewal	May 2022	May 2021	YTD This Year	YTD Last Year
Pharmacy Permits						
Full Time (SD)	1	134	135	119	142	130
Part Time (SD)	0	34	34	22	41	27
Non-Resident	9	419	428	385	533	589
Pharmacist Licenses						
South Dakota	3	0	3	0	1312	1305
Non-Resident	5	0	5	1	805	763
Technician Registration	21	9	30	34	1480	1495
Pharmacy Interns	3	0	3	3	337	346
Wholesale Permits						
South Dakota	0	0	0	0	45	48
Non-Resident	14	7	21	24	1298	1271
Inspections						
Pharmacy Inspections			28	26	301	278
Wholesale Inspections			0	1	25	27
Other Pharmacy Visits/Meetings			36	37	424	664
Controlled Drug Destruction			0	0	0	0
PDMP Visits			25	17	224	173

South Dakota
Board of Pharmacy
4001 W. Valhalla Blvd., Ste. 106
Sioux Falls, SD 57106
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Approvals, Variances, and Pharmacy changes for June 24, 2022 Board Meeting

Approvals

New approval to utilize a ScriptPro CRS225 Robotic Prescription Dispensing System for Lewis Drug #15, 2525 Ellis Road, Sioux Falls; Lewis Family Drug #43 119 6th Ave SW, Aberdeen; Lewis Drug #72, 1305 West Havens Ave, Mitchell; and Lewis Family Drug #44, 825 SD HWY 10, Sisseton.

Variances/Waivers

1. Renewal of Variance for Spearfish Monument Hospital regarding frequency of on-site visits to Lead Deadwood Monument Hospital telepharmacy by pharmacists from 4 times monthly to 2 times monthly.
2. Renewal of Vilas variance to twice monthly on-sight inspections provided by Vilas Pharmacist personnel for Eagle Butte, Faith, Lead, and Ipswich telepharmacy locations.
3. Renewal and revision of Monument Health Rapid City Hospital tech-check-tech variance for all items which are bar coded from receipt to patient administration.

New Pharmacies/Closed Pharmacies and New/Closed Wholesale Distributors

1. New Full-Time Pharmacy, Lewis Family Drug, LLC dba Lewis Family Drug #47, #100-2081, Harrisburg
2. New Full-Time Pharmacy, CHOW, Avera St. Luke's dba Avera Plaza Pharmacy, #100-2080, Aberdeen
3. New Part-Time Pharmacy, Spearfish Canyon Healthcare, #200-1748, Spearfish
4. New Part-Time Pharmacy, Rolling Hills Healthcare, #200-1749, Belle Fourche
5. New Part-Time Pharmacy, CHOW, Avantara Groton/Continued Care LTC Pharmacy, #200-1750, Groton
6. New Part-Time Pharmacy, CHOW, Avantara Clark/Continued Care LTC, #200-1751, Clark
7. New Part-Time Pharmacy, Avantara Lake Norden/Continued Care LTC, #200-1752, Lake Norden
8. New Part-Time Pharmacy, CHOW, Avantara Norton/Continued Care LTC, #200-1753, Sioux Falls
9. New Part-Time Pharmacy, CHOW, Avantara Pierre, #200-1754, Pierre
10. New Part-Time Pharmacy, Avantara Milbank/Continued Care LTC, #200-1755, Milbank
11. Closed Full-Time Pharmacy, Brothers Pharmacy, #100-1961, Brookings
12. Closed Full-Time Pharmacy, Rambo LTC, #100-2046, Brookings
13. Closed Full-Time Pharmacy, Kesslers Pharmacy, DBA Jones Drug #100-2017, Aberdeen

REVENUE REPORT BY MONTH

	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	YTD FY20
Wholesale	0	0	0	0	0	0	0	0	0	0	0		0
FT Pharmacy	0	0	0	0	0	0	0	0	0	0	0		0
PT Pharmacy	0	0	0	0	0	0	0	0	0	0	0		0
Nonresident	0	0	0	0	0	0	0	0	0	0	0		0
Initial Certification	0	0	0	0	0	0	0	0	0	0	0		0
RPh Renewal / New	0	0	1,000	0	0	1,250	0	0	0	0	0		2,250
Interns	0	0	0	0	0	0	0	0	0	0	0		0
Reciprocity	0	0	0	0	0	0	0	0	1,200	1,050	0		2,250
Technicians	0	0	0	0	0	0	0	0	0	0	0		0
Miscellaneous	0	0	1,200	0	0	1,400	0	0	2,300	400	0		5,300
Other - Electronic Fees	13,635	105,835	156,155	62,925	130,900	154,655	12,765	11,270	10,395	24,545	113,525		796,605
Late Fee Penalties			25										25
Recovery Legal Fees													0
Fines, Forfeits & Penalties													0
Interest Revenue													0
Sub-Total	13,635	105,835	158,380	62,925	130,900	157,305	12,765	11,270	13,895	25,995	113,525	0	806,430
Federal Grant Program GY7													0.00
CASH CENTER BALANCE	$409,508.61												

Remaining Authority by Object/Subobject

Expenditures current through 06/04/2022 10:20:52 AM
HEALTH -- Summary
FY 2022 Version -- AS -- Budgeted and Informational
FY Remaining: 7.4 %

09209   Board of Pharmacy - Info

Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	PCT AVL
EMPLOYEE SALARIES							
5101010	F-t Emp Sal & Wages	540,198	362,903	0	0	177,295	32.8
5101020	P-t/temp Emp Sal & Wages	171,443	160,451	0	0	10,992	6.4
5101030	Board & Comm Mbrs Fees	1,963	1,200	0	0	763	38.9
Subtotal		**713,604**	**524,554**	**0**	**0**	**189,050**	**26.5**
EMPLOYEE BENEFITS							
5102010	Oasi-employer's Share	54,127	35,855	0	0	18,272	33.8
5102020	Retirement-er Share	18,500	27,880	0	0	-9,380	0.0
5102060	Health Insurance-er Share	77,720	59,027	0	0	18,693	24.1
5102080	Worker's Compensation	1,000	1,102	0	0	-102	0.0
5102090	Unemployment Compensation	300	47	0	0	253	84.3
Subtotal		**151,647**	**123,911**	**0**	**0**	**27,736**	**18.3**
51 Personal Services							
Subtotal		**865,251**	**648,465**	**0**	**0**	**216,786**	**25.1**
TRAVEL							
5203010	Auto-state Owned-in State	7,229	3,025	0	0	4,204	58.2
5203020	Auto Priv (in-st.) L/rte	600	394	0	0	206	34.3
5203030	Auto-priv (in-st.) H/rte	6,000	3,419	0	0	2,581	43.0
5203040	Air-state Owned-in State	3,000	0	0	0	3,000	100.0
5203100	Lodging/in-state	9,479	2,053	0	0	7,426	78.3
5203140	Meals/taxable/in-state	1,679	1,090	0	0	589	35.1
5203150	Non-taxable Meals/in-st	2,000	1,018	0	0	982	49.1
5203220	Auto-priv.(out-state) L/r	200	0	0	0	200	100.0
5203230	Auto-priv.(out-state) H/r	1,600	0	0	0	1,600	100.0
5203260	Air-comm-out-of-state	10,000	317	0	0	9,683	96.8
5203280	Other-public-out-of-state	100	57	0	0	43	43.0
5203300	Lodging/out-state	6,400	1,372	0	0	5,028	78.6
5203320	Incidentals-out-of-state	152	144	0	0	8	5.3
5203350	Non-taxable Meals/out-st	900	250	0	0	650	72.2
Subtotal		**49,339**	**13,139**	**0**	**0**	**36,200**	**73.4**
CONTRACTUAL SERVICES							
5204010	Subscriptions	250	0	0	0	250	100.0
5204020	Dues & Membership Fees	500	250	0	0	250	50.0
5204050	Computer Consultant	258,067	143,980	7,180	0	106,907	41.4
5204080	Legal Consultant	4,278	2,761	0	0	1,517	35.5

09209   **Board of Pharmacy - Info**

Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	PCT AVL
5204140	Contract Pymts To St Agen	20,000	18,000	0	0	2,000	10.0
5204160	Workshop Registration Fee	4,000	1,405	0	0	2,595	64.9
5204180	Computer Services-state	13,310	21,803	0	0	-8,493	0.0
5204181	Computer Services-state	3,919	204	0	0	3,715	94.8
5204200	Central Services	6,356	7,288	0	0	-932	0.0
5204202	Central Services	103	57	0	0	46	44.7
5204203	Central Services	103	71	0	0	32	31.1
5204204	Central Services	418	343	0	0	75	17.9
5204207	Central Services	3,638	4,629	0	0	-991	0.0
5204220	Equipment Serv & Maint	600	346	0	0	254	42.3
5204320	Audit Services-private	1,000	0	0	0	1,000	100.0
5204340	Computer Software Maint	0	83	0	0	-83	0.0
5204360	Advertising-newspaper	1,000	0	0	0	1,000	100.0
5204430	Publishing	1,000	155	0	0	845	84.5
5204460	Equipment Rental	1,100	2,376	0	0	-1,276	0.0
5204490	Rents-private Owned Prop.	39,277	37,061	0	0	2,216	5.6
5204510	Rents-other	250	0	0	0	250	100.0
5204530	Telecommunications Srvcs	5,200	5,191	0	0	9	0.2
5204550	Garbage & Sewer	50	195	0	0	-145	0.0
5204590	Ins Premiums & Surety Bds	1,450	1,881	0	0	-431	0.0
5204620	Taxes & License Fees	196,708	203,500	0	0	-6,792	0.0
5204960	Other Contractual Service	407,028	76,906	0	0	330,122	81.1
Subtotal		**969,605**	**528,485**	**7,180**	**0**	**433,940**	**44.8**

SUPPLIES & MATERIALS

Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	PCT AVL
5205020	Office Supplies	2,300	1,303	0	0	997	43.3
5205040	Educ & Instruc Supplies	300	0	0	0	300	100.0
5205310	Printing-state	1,100	605	0	0	495	45.0
5205320	Printing-commercial	400	55	0	0	345	86.3
5205330	Supp. Public & Ref Mat	50	0	0	0	50	100.0
5205350	Postage	4,900	994	0	0	3,906	79.7
5205980	Procurement Card Purchase	0	9	0	0	-9	0.0
Subtotal		**9,050**	**2,966**	**0**	**0**	**6,084**	**67.2**

CAPITAL OUTLAY

Subobject		Operating	Expenditures	Encumbrances	Commitments	Remaining	PCT AVL
5207671	Audio-visual Equip	0	11,538	0	0	-11,538	0.0
5207901	Computer Hardware	5,764	1,228	0	0	4,536	78.7
5207960	Computer Software	30,000	0	0	0	30,000	100.0
5207961	Computer Software	0	298	0	0	-298	0.0

Subtotal	**35,764**	**13,064**	**0**	**0**	**22,700**	63.5
52 Operating						
Subtotal	**1,063,758**	**557,654**	**7,180**	**0**	**498,924**	46.9
Total	**1,929,009**	**1,206,119**	**7,180**	**0**	**715,710**	37.1

Board of Pharmacy - Inspection Report		2nd Quarter 2022		
Kari Shanard-Koenders				
Date	Destination	City	Purpose	PDMP/ Narc Destruction
04/01/2022	NABP Execuive Officers Meeting	Sioux Falls	Meeting	
04/05/2022	A Citizens Petition to Schedule the Widely-used Drugs Gabapentin and Gabapentin Enacarbil	Sioux Falls	Meeting	
04/06/2022	FDA Inspections of Outsourcing Facilities	Sioux Falls	Meeting	
04/07/2022	Quarterly Board of Pharmacy Meeting	Sioux Falls	Meeting	
04/08/2022	DOH Licensing Board Interview	Sioux Falls	Meeting	
04/08/2022	SDSHP Annual Meeting	Sioux Falls	Meeting	
04/09/2022	SDSHP Annual Meeting	Sioux Falls	Meeting	
04/11/2022	NASCSA Education Committee	Sioux Falls	Meeting	
04/14/2022	DOH Covid 19 Webinar	Sioux Falls	Meeting	
04/19/2022	Section 5042 of the SUPPORT Act: How state Medicaid agencies can partner with their State PDMP to bridge the gap	Sioux Falls	Meeting	
04/25/2022	Speak to P2 Students with Tyler Dr. Meyer's class	Brookings	Teach class	
04/25/2022	SDPHA Sioux Falls District Meeting Presentation	Sioux Falls	Meeting	
04/24/2022	Tyler and I meet with Lynn Valenti and Chris Qualm	Sioux Falls	Meeting	
04/27/2022	Kay Doyle Presentation to Nascsa Members, Moderator	Sioux Falls	Meeting	
04/29/2022	Licensing Staff Meeting	Sioux Falls	Meeting	
04/29/2022	NABP Execuive Officers Meeting	Sioux Falls	Meeting	
05/02/2022	Monument Health Home Plus Discussion Central Fill	Sioux Falls	Meeting	
05/05/2022	Pharmacy Technician Virtual Advisory Committee Mtg	Sioux Falls	Meeting	
05/11/2022	Lloyd Jessen District V meeting	Sioux Falls	Meeting	
05/12/2022	DOH Covid 19 Webinar	Sioux Falls	Meeting	
05/13/2022	Budget to Amanda Shoop	Sioux Falls	Meeting	
05/18/2022	118th NABP Annual Meet8ing	Phoenix	Meeting	
05/19/2022	118th NABP Annual Meet8ing	Phoenix	Meeting	
05/20/2022	118th NABP Annual Meet8ing	Phoenix	Meeting	
05/21/2022	118th NABP Annual Meet8ing	Phoenix	Meeting	
05/24/2022	Section 5042 Discussion with Bamboo and Melissa	Sioux Falls	Meeting	
05/24/2022	NASCSA Education Committee	Sioux Falls	Meeting	
05/24/2022	Bamboo Contract Meeting	Sioux Falls	Meeting	
06/01/2022	NASCSA Webinar: Insight on Proposed DEA Suspicious Order Monitoring rule changes in 2022	Sioux Falls	Meeting	
06/03/2022	Multiple Board Discussion	Sioux Falls	Meeting	
06/09/2022	Stark Law: Back to Basics Webinar	Sioux Falls	Meeting	
06/10/2022	Discipline Committee Meeting/Rising	Sioux Falls	Meeting	
06/10/2022	Medicaid P&T Committee Meeting	Sioux Falls	Meeting	
06/17/2022	Sanford Health Plans	Sioux Falls	Meeting	
06/22/2022	DOH Board Member Training	Sioux Falls	Meeting	
06/23/2022	Inspector Meeting	Sioux Falls	Meeting	
06/23/2022	DOH Surveyor/Inspector Meeting	Sioux Falls	Meeting	
06/24/2022	Quarterly Board of Pharmacy Meeting	Sioux Falls	Meeting	

Board of Pharmacy - Inspection Report		2nd Quarter 2022		
Melissa DeNoon				
Date	Destination	City	Purpose	PDMP/NARC Destruction
4/1/22	NASCSA Membership Committee	Sioux Falls	Meeting	
4/5/22	NASCSA	Sioux Falls	Webinar	
4/6/22	NASCSA PMP Data Integrity Subcommittee	Sioux Falls	Co-Chairs Meeting	
4/7/22	SD Board of Pharmacy	Sioux Falls	Quarterly Board Meeting	
4/12/22	DOH	Sioux Falls	All Staff Meeting	
4/13/22	Lewis - Jessica Strobl and PDMP Staff	Sioux Falls	PDMP Data Submission	
4/13/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
4/14/22	RxCheck Governance Board	Sioux Falls	Meeting	
4/19/22	SDSU College of Pharmacy P2 Law Class	Sioux Falls	PDMP Presentation	PDMP Presentation
4/19/22	Bamboo Health	Sioux Falls	SUPPORT Act Webinar	
4/20/22	USD Evaluator Susan P, DOH Laura S	Sioux Falls	Masked Data Extracts Review	
4/27/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
4/27/22	NASCSA PMP Conference Planning Subcomm	Sioux Falls	Meeting	
4/28/22	TTAC	Sioux Falls	Webinar	
4/29/22	DOH CDC OD2A Teams	Sioux Falls	Meeting	
5/2/22	NASCSA Exec Director & Logicoy reps	Sioux Falls	Sponsorship Meeting	
5/5/22	SOR DTB Project	Sioux Falls	Meeting	
5/5/22	NASCSA PMP Data Integrity Subcomm Pt Name Matching Group	Sioux Falls	Meeting	
5/9/22	NASCSA Executive Committee	Sioux Falls	Meeting	
5/9/22	Rural OUD Advisory Board	Sioux Falls	Meeting	
5/9/22	NASCSA Membership Committee	Sioux Falls	Meeting	
5/10/22	Microsoft Excel L100	Sioux Falls	Training	
5/11/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
5/11/22	NASCSA PMP Conference Planning Subcomm	Sioux Falls	Meeting	
5/12/22	Microsoft Excel L200	Sioux Falls	Training	
5/12/22	RxCheck Governance Board	Sioux Falls	Biannual Meeting	
5/19/22	NASCSA PMP Data Integrity Subcomm Pt Name Matching Group	Sioux Falls	Meeting	
5/19/22	TTAC	Sioux Falls	Webinar	
5/19/22	NASCSA PMP Committee	Sioux Falls	Meeting	
5/20/22	NASCSA Executive Committee	Sioux Falls	Meeting	
5/24/22	Bamboo Health & PDMP Staff	Sioux Falls	SUPPORT Act Discussion	
5/24/22	NASCSA PMP Data Integrity Subcommittee	Sioux Falls	Meeting	
5/25/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
6/1/22	APhA Institute on SUDs	SLC, UT	Conference	
6/2/22	APhA Institute on SUDs	SLC, UT	Conference	
6/3/22	APhA Institute on SUDs	SLC, UT	Conference	
6/4/22	APhA Institute on SUDs	SLC, UT	Conference	
6/5/22	APhA Institute on SUDs	SLC, UT	Conference	
6/8/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
6/9/22	RxCheck Governance Board	Sioux Falls	Meeting	
6/13/22	NASCSA Executive Committee	Sioux Falls	Meeting	
6/15/22	2022 CDC/ASTHO OD2A Grant Meeting	Sioux Falls	PDMP Session	
6/16/22	NASCSA PMP Committee	Sioux Falls	Meeting	
6/20/22	USD Sanford School of Medicine Incoming Residents	Sioux Falls	PDMP Presentation	PDMP Presentation
6/22/22	Bamboo Health & PDMP Staff	Sioux Falls	Bimonthly CRM & SGI Mting	
6/22/22	Haley Winans - MI PMP	Sioux Falls	NASCSA Conf. Planning	
6/24/22	SD Board of Pharmacy	Sioux Falls	Quarterly Board Meeting	

Board of Pharmacy - Inspection Report		2nd Quarter 2022		
Tyler Laetsch				
Date	Destination	City	Purpose	PDMP/ Narc Destruction
4/8/22	Walmart Minn Ave	Sioux Falls	Inspection	PDMP
4/11/22	Walgreen's Kiwanis Ave	Sioux Falls	Inspection	PDMP
4/12/22	DOH Quarterly Meeting	Sioux Falls	Virtual Meeting	
4/12/22	Brandon Pharmacy	Brandon	Inspection	PDMP
4/13/22	Parkston Drug	Parkston	Inspection	PDMP
4/13/22	Avera St. Benedict's	Parkston	Inspection	
4/14/22	Encompass	Sioux Falls	Inspection	
4/19/22	Walgreen's	Mitchell	Inspection	PDMP
4/19/22	Pharmerica- Firesteele	Mitchell	Inspection	
4/19/22	Walmart	Mitchell	Inspection	PDMP
4/20/22	Sanford Oncology Clinic Pharmacy	Sioux Falls	Inspection	PDMP
4/20/22	Avera 7th Ave	Sioux Falls	Inspection	PDMP
4/21/22	Continued Care LTC Pharmacy	Sioux Falls	Initial Inspection	
4/21/22	Medvantx	Sioux Falls	Inspection	PDMP
4/21/22	Ameripharm	Sioux Falls	Inspection	PDMP
4/25/22	SDSU P2 Presentation	Brookings	Presentation	
4/27/22	DOH Hospital Survey Meeting	Sioux Falls	Virtual Meeting	
4/27/22	Lewis LTC #50	Sioux Falls	Inspection	
4/28/22	Sanford Vermillion	Vermillion	Inspection	
4/28/22	Davis Pharmacy	Vermillion	Inspection	PDMP
5/2/22	Monument Health Call	Sioux Falls	Virtual Meeting	
5/10/22	Genoa	Watertown	Inspection	PDMP
5/10/22	Hy-Vee	Watertown	Inspection	PDMP
5/11/22	Lewis Westgate	Sioux Falls	Inspection	PDMP
5/11/22	Wal-Mart Louise Ave	Sioux Falls	Inspection	PDMP
5/12/22	Hy-Vee 10th St	Sioux Falls	Inspection	PDMP
5/12/22	Sioux Empire Triage Center	Sioux Falls	Inspection	
5/17/22	Roger's Pharmacy	Yankton	Inspection	PDMP
5/17/22	Hy-Vee	Yankton	Inspection	PDMP
5/18/22	NABP Annual Meeting	Pheonix	Meeting	
5/19/22	NABP Annual Meeting	Pheonix	Meeting	
5/20/22	NABP Annual Meeting	Pheonix	Meeting	
5/21/22	NABP Annual Meeting	Pheonix	Meeting	
5/23/22	Avera LTC	Sioux Falls	Inspection	PDMP
5/24/22	Lewis #71	Mitchell	Inspection	PDMP
5/24/22	Lewis #72	Mitchell	Inspection	PDMP
5/25/22	Scotland Pharmacy	Scotland	Inspection	PDMP
5/25/22	Landman-Jungman Memorial Hospital	Scotland	Inspection	
5/26/22	Walgreen's	Yankton	Inspection	PDMP
5/26/22	Yankton Med Clinic Retail Pharmacy	Yankton	Inspection	PDMP
5/31/22	Avel e-Pharmacy	Sioux Falls	Inspection	
6/1/22	Avera Dell Rapids	Dell Rapids	Inspection	
6/1/22	Lewis Family Drug	Dell Rapids	Inspection	PDMP
6/6/22	Walgreens' 41st and Louise	Sioux Falls	Inspection	PDMP
6/7/22	Douglas Co. Memorial Hospital	Armour	Inspection	
6/7/22	Prairie Pharmacy	Armour	Inspection	PDMP
6/7/22	Pharmerica- Armour	Armour	Inspection	
6/7/22	Prairie Pharmacy	Corsica	Inspection	PDMP
6/8/22	Hy-Vee Louise Ave	Sioux Falls	Inspection	PDMP
6/10/22	Medicaid P&T meeting	Sioux Falls	Meeting	
6/14/22	Hy-Vee Sycamore Ave	Sioux Falls	Inspection	PDMP
6/15/22	NABP Training	Sioux Falls	Virtual Meeting	
6/16/22	Pharmerica Woonsocket	Woonsocket	Inspection	
6/16/22	Lewis Family Drug	Wessington Springs	Inspection	PDMP
6/16/22	Avera Weskota Memorial Hospital	Wessington Springs	Inspection	
6/17/22	Lewis 69th & Louise	Sioux Falls	Inspection	PDMP
6/22/22	Spring Meds	Sioux Falls	Inspection	PDMP
6/23/22	Inspector meeting	Sioux Falls	Meeting	
6/24/22	Quarterly Board Meeting	Sioux Falls	Meeting	

Board of Pharmacy - Inspection Report		2nd Quarter 2022		
Carol Smith				
Date	Destination	City	Purpose	PDMP/ Narc Destruction
4/6/22	Quarve Drug	Britton	Inspection	PDMP
4/6/22	Marshall County Hospital	Britton	Inspection	PDMP
4/6/22	BOP Office	Sioux Falls	Meeting	
4/6/22	BOP Quarterly Meeting	Sioux Falls	Meeting	
4/12/22	Vilas Pharmacy Highmore	Highmore	Inspection	PDMP
4/12/22	Avera Hand County Memorial Hospital	Miller	Inspection	
4/12/22	Miller Rexall Drug	Miller	Inspection	PDMP
4/20/22	Mobridge Regional Hospital	Mobridge	Inspection	PDMP
4/20/22	Stateline Drug dba Smith's Drug	Lemmon	Inspection	PDMP
4/21/22	Family Pharmacy Clinic	Mobridge	Inspection	PDMP
4/21/22	JRX Solutions	Mobridge	Wholesale Inspection	
4/21/22	Family Pharmacy Downton	Mobridge	Inspection	PDMP
4/26/22	Bien Pharmacy	Milbank	Inspection	PDMP
4/26/22	Milbank Regional Hospital	Milbank	Inspection	PDMP
4/26/22	Lincare Medical Gas	Big Stone City	Inspection	
5/4/22	Dosch Family Pharmacy	Eureka	Inspection	PDMP
5/4/22	Eureka Hospitl	Eureka	Inspection	PDMP
5/5/22	COCA Eval & Support COVID Pts Cog Symptoms	Groton	Webinar	
5/17/22	Avera Gettysburg Hospital	Gettysburg	Inspection	PDMP
5/17/22	Vilas Pharmacy Gettysburg	Gettysburg	Inspection	PDMP
5/18/22	Vilas Pharmacy Faith	Faith	Inspection	PDMP
5/18/22	Vilas Pharmacy Eagle Butte	Eagle Butte	Inspection	PDMP
5/26/22	Martin Drug & Mercantile	Martin	Inspection	PDMP
5/26/22	Bennett County Hospital	Martin	Inspection	PDMP
5/27/22	Mission Community Pharmacy	Mission	Inspection	PDMP
6/2/22	Walmart Huron	Huron	Inspection	PDMP
6/2/22	Coborn's Huron	Huron	Inspection	PDMP
6/7/22	Avera LTC Nexsys AMDD #1	Aberdeen	Inspection	PDMP
6/7/22	Avera LTC Nexsys AMDD #3	Aberdeen	Inspection	PDMP
6/15/22	NABP Program Review and Training	Groton	Online Training	
6/16/22	Huron Regional Hospital	Huron	Inspection	PDMP
6/16/22	Genoa	Huron	Inspection	PDMP
6/23/22	BOP Office	Sioux Falls	Meeting	
6/24/22	BOP Quarterly Meeting	Sioux Falls	Meeting	

Board of Pharmacy - Inspection Report		2nd Quarter 2022		
Lee Cordell				
Date	Destination	City	Purpose	PDMP/ Narc Destruction
4/6/22	Quarve Drug	Britton	Inspection	PDMP
4/6/22	BOP Quarterly Meeting	Sioux Falls	Meeting	
	BOP Office	Sioux Falls	Meeting	
4/8/22	Walmart South - SF with Tyler	Sioux Falls	Inspection	PDMP
4/12/22	Plastic Surgery Center of RC	Rapid City	Inspection	
4/12/22	Boyds Rx Express	Rapid City	Inspection	PDMP
4/20/22	Walmart	Spearfish	Inspection	PDMP
4/21/22	Safeway Pharmacy (Mt Rushmore)	Rapid City	Inspection	PDMP
4/21/22	Black Hills Surgical Hospital	Rapid City	Inspection	
5/10/22	Walgreens (Lacrosse)	Rapid City	Inspection	PDMP
5/10/22	Walgreens (Mt Rushmore)	Rapid City	Inspection	PDMP
5/26/22	CVS	Rapid City	Inspection	PDMP
6/6/21	Boyds St Patrick	Rapid City	Inspection	PDMP
6/6/21	Safeway Pharmacy (Mt View)	Rapid City	Inspection	PDMP
6/15/22	NABP Program Review	Spearfish	Online Training	PDMP
6/23/22	Inspector Meeting	Sioux Falls	Meeting	
6/24/22	Board of Pharmacy Meeting	Sioux Falls	Meeting	

South Dakota Prescription Drug Monitoring Program Update

June 24, 2022

What's New at the SD PDMP?

- SD's BJA FY 21 Harold Rogers PDMP Grant update:
  - Grant projects include:
    - Continued enhancement of SD's PMP AWARxE with the NarxCare platform
    - Continued facilitation of statewide Gateway integration to integrate the PDMP into SD prescribers' and pharmacists' workflows
  - Funding draw down still pending
- Data Integrity update

Presentations Given/Events Attended

- SDSU College of Pharmacy P2 Class PDMP presentation – Brookings, SD
- APhA Institute on Substance Use Disorders – Salt Lake City, UT
- Sanford Incoming Resident Orientation PDMP presentation – Sioux Falls, SD

Upcoming Events

- District Five NABP/AACP 85th Annual Meeting – August 3-5, 2022 – Custer, SD
- IIR/TTAC/BJA PDMP North & West Regional Meeting – August 9-11, 2022 – Salt Lake City, UT

APhA Institute on Substance Use Disorders Highlights

SDPhA Update | Summer 2022
Submitted June 15, 2022

SDPhA Spring and Annual Meetings

Spring District Meetings

Spring District meetings are complete and took place in a variety of ways this year. While some districts are back to meeting in person, others again utilized Zoom to gather. The Spring meeting is the most important meeting of the year for districts, as the Fall meeting is optional. A few districts had some leadership changes – you can find those on the SDPhA website. Election of officers is just one of the important items districts addressed. Districts also made nominations for the state association board of directors; and the recognition and nomination of worthy pharmacists, sales reps and technicians to be considered by the Executive Board for the awards presented at our annual meeting.

SDPhA Board Retreat | June 3-4

The SDPhA board held its annual retreat June 3-4. The board always uses this time together to tackle some of the association's biggest tasks, such as strategic planning and legislative goals for the coming year, continuing education opportunities and agenda items for the annual meeting and convention, setting the budget, and selection of annual award winners.

South Dakota Pharmacists Association Annual Meeting

It's Game On! (Again!) SDPhA plans to move forward with the 136th annual meeting in person Sept. 9-10 in Brookings, SD. Early bird registration is open on the website. We are planning a fantastic time of continuing education, networking, honoring our colleagues, a special Friday night reception with SDSU, and of course some Jackrabbit football on Saturday. After what feels like forever of meeting virtually for this event, to say we are excited to be back in person, and back in Brookings, feels like an understatement. It's going to be a fantastic weekend you don't want to miss!

Regional and National Meetings

PharmaCE Expo | May 17-18

We continue our work with the Iowa Pharmacists Association to promote the Midwest Pharmacy Expo, now called the PharmaCE Expo. Initially scheduled for early February, the event was rescheduled for May 17-18 this year. It is a comprehensive event offering a great deal of excellent CE for pharmacists and technicians. In exchange for our promotion of the event, our pharmacists have access at a great rate to attend, and allows us to offer more benefits for our members. The event has become more regional, with a significant number of states engaged. We're already looking forward to what 2023 has to bring for this event!

NASPA Summer Meeting

The National Alliance of State Pharmacy Associations, of which SDPhA is a member, will not hold its usual summer meeting. Typically, the group meets during the NACDS Total Store Expo which will be held this year in Boston in late August, but for a variety of reasons NASPA will move its major meetings to twice a year – typically in conjunction with APhA and NCPA annual meetings.

State and National Initiatives

Legislative Initiatives

SDPhA has already begun work on PBM initiatives for 2023. We are happy to report we will again retain the services of Craig Matson and Roger Tellinghuisen for those efforts. We also continue to work with long-time SDPhA lobbyist and general counsel Bob Riter and Lindsey Riter-Rapp. Next year's efforts will vary some from 2022. We'll get into more details as appropriate, but we highly encourage you to start talking to your state legislators now. With the primary election complete, we know, in most cases, who will be on the general election ballot this Fall. While there are some new faces, there are also plenty of familiar ones – make sure they know this is an important issue for you as a pharmacist, but more importantly – this is an important issue for your patients. We'll make some additional talking points available later this Summer, but please contact the SDPhA office if you'd like something prior.

National Initiatives

Federal Trade Commission and Centers for Medicare and Medicaid Services

We, along with many other organizations and individuals from South Dakota (some 24,000 comments have been submitted to date), again submitted comments to the Federal Trade Commission (FTC) regarding detrimental PBM practices, and previously expressed similar concerns to the Centers for Medicare and Medicaid Services (CMS) regarding DIR fees and their 2023 proposal. We are thrilled at the recent announcement that the FTC will probe six of the largest PBMS – having sent compulsory orders to CVS Caremark, Express Scripts, Optum Rx, Humana, Prime Therapeutics and MedImpact Healthcare Systems. This requires them to submit information and records on their business practices.

The inquiry is aimed at shedding light on several practices, including:
- Fees and clawbacks charged to unaffiliated pharmacies
- Methods to steer patients toward PBM-owned pharmacies
- Potentially unfair audits of independent pharmacies
- Complicated and opaque methods to determine pharmacy reimbursement
- The prevalence of prior authorizations and other administrative restrictions
- The use of specialty drug lists and surrounding specialty drug policies
- The impact of rebates and fees from drug manufacturers on formulary design and costs of prescriptions drugs to payors and patients.

Meanwhile, CMS has issued a final rule that would put an end to PBMs retroactive DIR fees, requiring they be reflected in the negotiated price the patient pays at the point of sale. So, the rule does not remove DIR fees, but instead moves them to the point-of-sale negotiated price. This change in policy benefits patients by lowering out-of-pocket costs and helps pharmacists increase predictability, consistency, and transparency.

The final rule also closed a proposed loophole that would have given authority to the Medicare Advantage Part D plans and PBMs to determine how much, if any of the pharmacy price concessions they would pass through to patients at the point of sale during the coverage gap in the Medicare Part D program.

SDPhA joined the chorus of those applauding the rule, yet also voicing concern over the timeline for implementation. The rule will not take effect until January 1, 2024.

Additional Advocacy Efforts

SDPhA also remains engaged in a variety of ways in other various national efforts on key topics directly impacting our pharmacists such as: COVID-19 related bills, DIR fee relief, PBM reform, pricing transparency, improvements to Medicare, prescription drug misuse and abuse, compounding guidance and provider status. There were many efforts to include some of these topics into additional Coronavirus legislation. Please refer to our online bill tracker for a complete list of the federal bills we are following related to the aforementioned issues.

Lobbying Funds Update | Commercial and Legislative Branch

This year's work on SB 163 shed some light on something that may have seemed a bit mysterious to many – the SDPhA Commercial and Legislative (C&L) Branch. The C&L branch is the lobbying arm of the association. You can think of it somewhat as the association's PAC (although there are VERY distinct differences we won't go into here).

Some very important things about this fund:
- The funds for our lobbying branch must be maintained separate from the general fund
- It relies nearly exclusively on your contributions
- For many years now, expenses have vastly outpaced contributions

Lobbying is an extremely expensive, but necessary function. We've been represented by the same firm for decades, and the executive director preforms many of the lobbying duties. That's all kept our rate very low – our lobbying expenses typically total only about $12,000 per year. This amount is far below the going rate of most lobbyists. In fact, the going rate for one session with many would empty our entire C&L Fund.

As referenced earlier, we had additional lobbyists working with us this session, and will again for 2023. It's a needed move in order to bring PBM reform, as clearly work on this issue is not complete. However, none of this legislative work can continue at all without your strong financial support. If we want to ensure the profession has a seat at the table, we have to pay for the chair. So far for 2022, contributions have covered about half of the lobbying expenses. Put simply – we need your help. $25, $250, 2,500 – whatever you can contribute will help ensure the profession continues to have representation at the Capitol. Because without your contributions – it simply won't.

You can support the C&L Fund by contributing online, or sending a check made out to the SDPhA C&L Branch, PO Box 518, Pierre, SD 57501.

Prescription Drug Abuse and Awareness

DEA Take-Back Events | April 30

Please visit https://www.dea.gov/sites/default/files/2022-05/NTBI22%20Totals.pdf to view full take-back event totals and information. In South Dakota, 14 law enforcement sites collected 1,168 pounds of unwanted medications. We continue to help spread the word about these opportunities and work to encourage pharmacist participation in these locally-held events. We also continue to work with pharmacists and the BOP to promote the year-round pharmaceutical disposal receptacles located throughout the state. If you have a story you'd like to share about either to aid in that promotion, please contact our office.

Prescription Drug Monitoring Program

The Prescription Drug Monitoring Program (PDMP) continues to grow and be an excellent resource for practitioners. South Dakota state law mandates PDMP registration for everyone who has a SD Controlled Substance Registration (SD CSR).

While the Board of Pharmacy is the entity managing the program, an advisory board was established under the law which consists of at least twelve (12) designees. Jessica Strobl serves on SDPhA's behalf on the advisory board. The group continues to make recommendations to the Board of Pharmacy as to how to best use the program to improve patient care and reduce the misuse, abuse or diversion of controlled substances. The advisory council also makes recommendations to the Board regarding safeguards for release of information to only persons who are entitled to access in order to maintain the confidentiality of program information.

South Dakota Opioid Abuse Advisory Committee

According to the National Institute on Drug Abuse, researchers have observed increases in substance abuse and drug overdoses since the COVID-19 pandemic was declared a national emergency. Nationwide, pharmacists continue to engage in the work to prevent prescription drug abuse with the knowledge that real solutions must balance the need for patient access to medications for legitimate medical purposes with the need to prevent diversion and abuse. Pharmacists are in a unique position to combat this epidemic due to their expertise and accessibility. SDPhA President Kristen Carter represents SDPhA on the South Dakota Opioid Abuse Advisory Committee. This committee meets twice a year. The last meeting was Jan. 7, 2022. The next meeting will be this summer, although the date remains TBA. You can learn more about their work here: https://doh.sd.gov/news/opioid.aspx.

Medical Marijuana and IM 26 Oversight Committee

Medical marijuana is now legal in South Dakota, and the legislature has spent a significant amount of time hammering out the details. SDPhA has not taken a position on medical marijuana, but has worked with legislators throughout the process to serve as a trusted resource on the topic. We continue to provide relevant, research-based information as the need arises. Initiated Measure 26 required the creation of an oversight committee, and South Dakota pharmacists have a seat at the table. On June 2, Eric Grocott, a past president of SDPhA, was appointed to the 14-member oversight committee by the executive board of the Legislative Research Council. The committee's role is to review and advise on medical marijuana in South Dakota. The group will hold its first meeting July 14, 2022.

Coronovirus (COVID-19)

Vaccination Distribution and Pandemic Response

As millions of Americans continue to receive the COVID-19 vaccine, pharmacists continue to play a key part in vaccine, testing and therapy rollout across the state. Variants, vaccine boosters, and new eligible populations in addition to flu season – all have again meant more demand on pharmacists across all practice settings. Pharmacists continue to be vital in vaccine distribution, handling, storage, standing up vaccination clinics, and finally, getting shots in arms.

Communication

We encourage everyone to continue to watch your email, the SDPhA Facebook Group page and the SDPhA website for updates and important pandemic and vaccine-related information. With new uncertainty regarding yet another Omicron variant, communication and offering assistance to our pharmacists and pharmacies continues to be a top priority for SDPhA.

Pharmacies and pharmacists are critical to the well-being of the citizens of South Dakota, not only in dealing with COVID-19, but also in our residents' ongoing care. The SDPhA website continues to house a COVID 19 Resources page. We continue to post "news" related information on our Facebook Group page. That includes pertinent updates from CMS, HHS, the FDA, DSS, etc. We also continue to send out emails to all as appropriate. We greatly appreciate the ongoing strong and open channels of communication with several state agencies, our congressional delegation and the South Dakota Board of Pharmacy on items of concern to pharmacists as well as public health and safety.

Advocacy and Engagement

As new variants, immunizations, boosters and treatments continue to emerge, we continue to engage with the BOP, South Dakota Department of Health, and other state partners on behalf of pharmacists where appropriate. Meantime at the federal level, we remain in close communication with our Congressional delegation, and continue to keep apprised of, and engaged where suitable, in the all the rapidly moving parts on Capitol Hill. Advocacy efforts now focus on maintaining the flexibilities extended to pharmacists by the federal government, while continuing to advocate for change that allows pharmacists to practice to the full scope of their expertise. This has included not only work on emergency provider status, but on immunizations, testing, payment, compounding and funding programs as well. The National Alliance of State Pharmacy Associations (NASPA) also continues to work on our behalf with many of our national partners on matters of concern and importance to pharmacists

Health Professional Assistance Program

The passage of SB4 in 2021 brought changes to some of the requirements for HPAP program administration. We continue to appreciate the open communication with the Board of Pharmacy on what this may mean for the future of the program. Our association continues to support HPAP, and saw no changes in the billing for FY 2022-2023. A pharmacist may access the program by self-referral, board referral, or referral from another person or agency, employer, coworker or family member.

Pharmacy Technician University (PTU)

After negotiating a new contract for 2022-2024, SDPhA is pleased to announce we will continue to offer low-cost access to this online training module. We do expect user fees will increase slightly starting in July 2022. SDPhA has now enrolled more than 120 participants. We are also thrilled to report 5 student participants from the DIAL Virtual program offered in various South Dakota High schools enrolled in the course for the 2021-2022 school year. We appreciate the pharmacists who have stepped up in communities across the state to work with the DIAL program and these students. This is an exceptional opportunity to introduce the profession into the school systems, and we are grateful for everyone working together who makes it happen.

Just a reminder, the Therapeutic Research Center - PTU 101 module we administer qualifies as a PTCB-Recognized Education/Training Program of the CPhT program, and upon completion, allows participants to sit for the certification exam. In addition to PTU 101, we now offer four additional training modules through TRC:

- PTU Elite: Immunizations
- PTU Elite: Math Mastery – Community Pharmacy
- PTU Elite: Compounded Sterile Preparation Technician Program
- PTU Elite: Soft Skills Program.

Additional modules are coming starting in July – you can find more about those soon on our website, and in the July edition of the South Dakota Pharmacist. For more details and enrollment information, contact Amanda Bacon at amanda@sdpha.org or (605) 224-2338.

Education, Communication, Public Affairs and Professional Relations
Continuing Education
The Association continues to focus on providing quality continuing education for practitioners. SDPhA continues to work with the SDSU College of Pharmacy to bring you interesting continuing education opportunities at the annual convention and throughout the year. We have also been engaged from time-to-time to assist pharmaceutical companies in getting the word out on local opportunities for informative programs.

Reaching Out
The Association prepares and delivers Legislative and Association Updates, CE and pharmacy-related information at Fall and Spring district meetings, in addition to delivering a variety of educational programs at each Annual Convention. The Association continues to work with student pharmacists on the American Pharmacists Month campaign, which helps bring awareness to the state about all pharmacists can do, and how patient care is improved with a pharmacist engaged. SDPhA previously provided SDSU students a grant for, and continues to assist with, pieces related to the, "More Than a Count" campaign. This campaign showcases the profession and SDPhA utilizing traditional and social media platforms to engage both pharmacists throughout the state as well as members of the general public.

The South Dakota Pharmacist
Communicating with our members quickly and effectively is extremely critical to the success of the Association. The South Dakota Pharmacist continues a quarterly electronic distribution. You can also find it posted with past issues on our website. It always offers 1.5 hours of CE, and provides a source of communication for the association on rules, legislative issues and education that affect pharmacy practice.

Website Updates
The SDPhA website continues to evolve! Visitors will find some key updates to the convention registration pages for both participants and sponsors to streamline the process. Another key change coming in July – a NEW and improved Action Center. We've contracted with a new service for this area – half the price of the old, and a product better suited to our website and how our pharmacists communicate with their lawmakers. You'll still find all the issues we're working on at the federal and state level, and an opt-in to receive text messages from us on key issues. But you'll also find an enhanced communication tool to help you contact your state and national lawmakers on issues most important to the profession. We're really excited about the customization this platform offers, and how it will enhance our communication and messaging opportunities!

Social Media/Email Blasts
We continue to utilize and expand our social media footprint where appropriate. This presence is something we consider vital to our work of representing the pharmacy profession through advancing patient care, enhancing the public awareness, and serving in the best interest of public health and pharmacy.

SCAPP | SDSU APhA – ASP Chapter
We continue to work closely with SDSU, and the student pharmacists. The student liaisons continue to work hard to keep us apprised of activities, and the SDPhA board remains committed to supporting the students in every way possible. This includes activities such as convention attendance (free of charge), rooms for convention and Legislative Days, and support for the Back-to-School Picnic, Pharmacy Days, and American Pharmacists Month activities. We commend them on continuing the successful messaging created as part of the "More Than a Count" campaign, and will continue to work with them on messaging and communication. We believe these activities are an incredible investment in your association's future. The student pharmacists worked extremely hard to assist us with the 2021

virtual meeting as well, which was greatly appreciated! We also remain a resource for faculty whenever needed, and collaborate on projects whenever possible.

Office Update

It's been a very busy Spring in the SDPhA office – there hasn't been much downtime since the conclusion of the 2022 Legislative Session. Work on ensuring the best path forward for our PBM initiatives in 2023 consumes most of the days, as well as completing everything necessary for the end of this fiscal year. The Fall convention and fundraising for C&L are also priorities for the summer months. We have a lot on our plate, and we will continue to rise to the challenge, and appreciate the collaborative spirit we find in working with the Board of Pharmacy on so many endeavors as we move forward.

Kind Regards,

Amanda Bacon

Executive Director
South Dakota Pharmacists Association

SD Pharmacists Association
Profit & Loss Budget vs. Actual
July 1, 2021 through May 24, 2022

	Jul 1, '21 - May 24, 22	Budget	% of Budget
Ordinary Income/Expense			
Income			
Unrestricted Grants	1,000.00	0.00	100.0%
Administrative Income	1,461.58	0.00	100.0%
Membership			
SD Board of Pharmacy Transfer	203,500.00	199,000.00	102.3%
Associate Member	200.00	200.00	100.0%
District Dues			
District 9 - Yankton	45.00	0.00	100.0%
District 8 - Watertown	100.00	0.00	100.0%
District 7 - Sioux Falls	340.00	0.00	100.0%
District 6 - Rosebud	30.00	0.00	100.0%
District 5 - Mobridge	30.00	0.00	100.0%
District 4 - Mitchell	20.00	0.00	100.0%
District 3 - Huron	10.00	0.00	100.0%
District 2 - Black Hills	200.00	0.00	100.0%
District 1 - Aberdeen	260.00	0.00	100.0%
Total District Dues	1,035.00	0.00	100.0%
Student Membership	1,012.00	1,100.00	92.0%
Total Membership	205,747.00	200,300.00	102.7%
Corp Endorsements			
NASPA-PQC Endorsement	600.00	300.00	200.0%
Career Center Endorsement	251.66	0.00	100.0%
PAAS Endorsement	186.00	275.00	67.6%
PMG Endorsement	17,457.00	10,000.00	174.6%
Total Corp Endorsements	18,494.66	10,575.00	174.9%
Grants (unrestricted)	2,500.00	0.00	100.0%
Advertising/Marketing			
Advertising - Journal	25.00	0.00	100.0%
Total Advertising/Marketing	25.00	0.00	100.0%
Interest/Dividends	262.47	300.00	87.5%
Convention Income			
PhRMA Education Grant	1,000.00	0.00	100.0%
Convention Sponsor	11,600.00	0.00	100.0%
Exhibitors	16,330.00	15,000.00	108.9%
Registrations	10,548.78	17,500.00	60.3%
Student Sponsorship	175.00	0.00	100.0%
Total Convention Income	39,653.78	32,500.00	122.0%
Total Income	269,144.49	243,675.00	110.5%
Gross Profit	269,144.49	243,675.00	110.5%
Expense			
American Pharmacists Month	1,065.00	1,850.00	57.6%
Accounting/Tax Prep	4,004.92	4,800.00	83.4%
Salary & Benefits			
Payroll Taxes	4,867.31	5,508.00	88.4%
Payroll Expense	43.92	50.00	87.8%
Executive Director	58,625.07	67,000.00	87.5%
Exective Director Bonus	5,000.00	5,000.00	100.0%
Insurance	9,963.25	11,469.00	86.9%
Retirement	3,817.50	4,320.00	88.4%
Total Salary & Benefits	82,317.05	93,347.00	88.2%
Advertising	0.00	3,000.00	0.0%
Dues/Subscriptions	2,194.91	3,300.00	66.5%
Technology/Net/Software	17,826.81	17,200.00	103.6%
Furniture/Copier/Assets	1,755.01	2,300.00	76.3%
Hlth Professionals Assist Prog	20,000.00	20,000.00	100.0%

	Jul 1, '21 - May 24, 22	Budget	% of Budget
Insurance (D&O, Office)	3,578.00	3,600.00	99.4%
Legal/Professional	532.56	5,000.00	10.7%
Merchant Card Fees	1,773.99	2,300.00	77.1%
Phone/Internet	3,831.81	5,500.00	69.7%
Postage	244.35	150.00	162.9%
Office Supplies	329.15	1,500.00	21.9%
Publications & Printing (Exp)			
Journal	859.99	4,180.00	20.6%
Total Publications & Printing (Exp)	859.99	4,180.00	20.6%
Scholarships	0.00	1,000.00	0.0%
Rent	4,656.00	4,700.00	99.1%
Board Travel & Meetings	7,673.06	20,000.00	38.4%
Staff Travel			
In-State	770.83	5,000.00	15.4%
Out-of-State	0.00	6,000.00	0.0%
Total Staff Travel	770.83	11,000.00	7.0%
Convention Expense	8,915.94	15,000.00	59.4%
Misc Expense	264.94	500.00	53.0%
Total Expense	162,594.32	220,227.00	73.8%
Net Ordinary Income	106,550.17	23,448.00	454.4%
Other Income/Expense			
Other Income			
PTU Pass Thru Income	4,550.00	0.00	100.0%
C/L Contributions Pass Thru			
Corporation/Business C/L Contr.	500.00	0.00	100.0%
Individual C/L Contr.	1,000.00	0.00	100.0%
Total C/L Contributions Pass Thru	1,500.00	0.00	100.0%
Total Other Income	6,050.00	0.00	100.0%
Other Expense			
PTU Pass Thru Exp	5,445.00	6,500.00	83.8%
Total Other Expense	5,445.00	6,500.00	83.8%
Net Other Income	605.00	-6,500.00	-9.3%
Net Income	107,155.17	16,948.00	632.3%

SD Pharmacists Association C & L
Revenue & Expenses Budget vs. Actual
July 1, 2021 through May 24, 2022

	Jul 1, '21 - May 24, 22	Budget	% of Budget
Income			
C & L Income	16,131.45	5,500.00	293.3%
Interest	680.52	0.00	100.0%
Total Income	16,811.97	5,500.00	305.7%
Expense			
Legislative Exp	17,952.98	12,450.00	144.2%
Total Expense	17,952.98	12,450.00	144.2%
Net Income	**-1,141.01**	**-6,950.00**	**16.4%**

36-11-6. Use of funds by Pharmacists Association--Approval of expenditures--Filing statement.

The board may, upon receipt, pay to the South Dakota Pharmacists Association eighty percent of all fees the board receives for renewals of certificates of registration as a pharmacist. The association shall use the funds for the following association activities to benefit the public and the profession: continuing education, matters related to registration standards for pharmacists, professional service standards, and general operating expenses related to the activities enumerated in this section. The association shall also use funds received to pay any legislated assessment to support a diversion program for chemically impaired pharmacists. Expenditures of funds shall be approved by the president and treasurer of the association. The association shall annually file in the office of the board an itemized statement of the receipts of the association and disbursements from the receipts.

Source: SDC 1939, § 27.1004; SL 1967, ch 102, § 5; SL 1996, ch 230, § 2; SL 2005, ch 199, § 33.

3/22/2022

Michele Kooiman, PharmD
353 Fairmont Blvd.
Rapid City, SD 57701

Kari Shanard-Koenders
4001 W. Valhalla Blvd. Suite 106
Sioux Falls, SD 57106
Cc via email: kari.shanard-koenders@state.sd.us

Re: Board Rule 20:51:20:04 Use of common electronic data base Waiver

 Dear Members of the South Dakota Board of Pharmacy (Board):

We at Monument Home+ Pharmacy located in Spearfish, SD License #100-1970 wish to engage in a central fill agreement with Sonexus Health, a pharmacy owned by Cardinal Health and located in Lewisville, TX. Monument Home+ Pharmacy has served the residents of Spearfish, SD, and the surrounding communities for over 9 years. In addition to dispensing prescriptions, we offer a wide range of pharmacy services including immunizations and unit dose packaging. Adding a central fill option with Sonexus Health will enable us to further expand our service offering(s) for our patients.

In our agreement with Sonexus Health, Monument Home+ Pharmacy will provide the front-end processing of data entry, data review, prescription adjudication and medsync. Prescriptions will then be sent electronically to Sonexus Health where the pharmacy staff fills the prescriptions and an on-site pharmacist performs final product verification. At completion, the prescriptions will be sent back to Monument Home+ Pharmacy for dispensing and counseling to the patient.

Board rule 20:51:20:04 Use of common electronic data base, requires that a common database be utilized by two or more pharmacies licensed by the board to practice pharmacy, including services such as our proposed model of central fill. We are seeking a waiver from this rule as our pharmacy and Sonexus Health will utilize technology that permits the sharing of information needed to safely process, fill and dispense prescriptions.

Waiver of Board Rule 20:51:20:04 will enable us to provide better care for our patients by improving workflow and streamlining the fill process. This will allow our pharmacy staff to focus on patient-facing services that will help improve medication adherence, compliance, and most importantly enhance patient safety. We envision this arrangement with Sonexus Health to be beneficial for our patients, and we will be happy to answer any questions regarding this petition as requested by the Board.

We would also like to extend this waiver to our Rapid City location at 353 Fairmont Blvd., Rapid City, SD License #100-1986.

Thank you for the opportunity and consideration.

Sincerely,
Michele Kooiman, PharmD
Monument Home+ Pharmacy

Proposed New Service

NavixRx™ (Cardinal Health)

Jessica Adams and Catherine Ronalder

June 2022

Meeting the Needs of Patients and Pharmacies
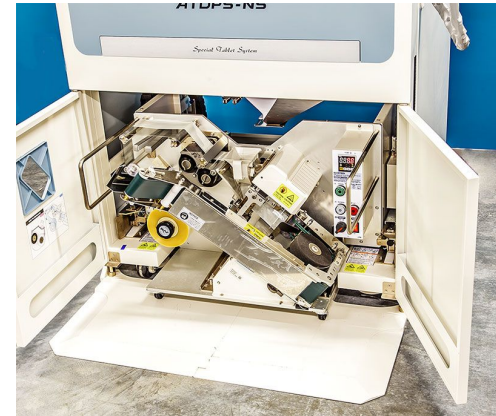

- ## Patient Safety
  - ### Patient Non-Adherence
    - $300 billion avoidable healthcare costs*
    - 125,000 Preventable Deaths**
    - Utilized today
- ## Pharmacies
  - ### Independents, LTC, small chains, etc
  - ### Cost Prohibitive
    - $500,000 and up
  - ### Need technology to compete

Proposed Operations

- Sonexus Pharmacy (Cardinal Health) purchases machinery

- Independent Pharmacies "rent" per use

  - Independent Pharmacy does MedSync
  - Send Rxs to Sonexus Pharmacy
  - Machinery packages Med-packs
    - DSCSA Compliant
    - Inventory tracked virtually
    - One Lot per Cell
  - Sonexus pharmacy fills prescriptions using Med-packs via central fill

  - Independent Pharmacy delivers to patient
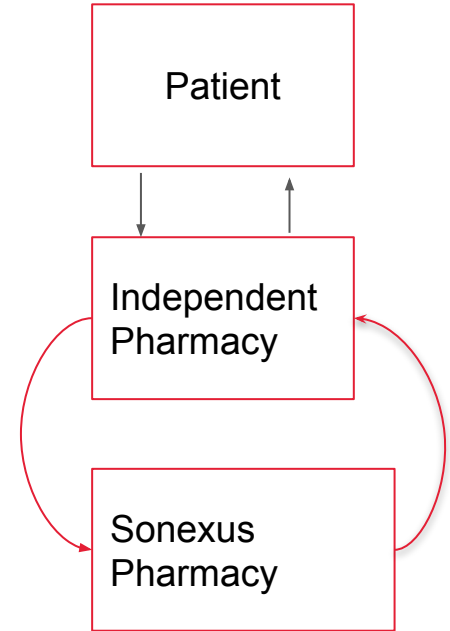
Central Fill + Customized Patient Medication Packaging

Combines two unique services into one offering:

- Central Fill
  - Allowing Sonexus Pharmacy to fill a prescription drug order at the request of a pharmacy

- Customized Patient Medication Packaging
  - A package prepared by a pharmacist for a specific patient comprising a series of containers containing two or more prescribed solid oral dosage forms. The label indicates the day and time, or period of time, that the contents within each container are to be taken.

Regulatory Analysis

- Customized Patient Medication packaging will meet the definition mentioned in 20:51:21:01 and all labeling requirements outlined in 20:51:05:21
- Automated pharmacy system will meet the definition as mentioned in TSBP §291.33(i)(2) for automated dispensing systems.
- Additional safety measures
  - Facility will be ISO 9001 certified
  - Packaging will meet all USP Standards

Regulatory Considerations

Current regulation in 20:51:20:04 for common electronic database only addresses refills, and requires approval by the Board of Pharmacy

- **Chapter 20:51:20:04. Use of Common electronic data base**

  Use of common electronic data base. Upon approval of the Board of Pharmacy, two or more pharmacies licensed by the board may utilize a common electronic data base to practice pharmacy as provided by SDCL 36-11-2.2

  Prescriptions may be refilled at any of these pharmacies as long as each pharmacy is identified by a unique code that documents the location of each filling and provisions are made to assure that the number of authorized refills is not exceeded. Application for approval must be made on a form supplied by the Board of Pharmacy.

Regulatory Considerations

- SDCL 36.11-2.2. **Practice of pharmacy defined.**

  The practice of pharmacy means:
  1. *Interpretation and evaluation of prescription drug orders and dispensing in the patient's best interest;*
  2. *Provision of patient counseling and pharmaceutical care; and*
  3. *The responsibility for compounding, distributing, labeling, and storage of drugs and for maintaining proper records for them.*

Questions?

jessica.adams01@cardinalhealth.com

catherineronalder@sonexushealth.com

June 2, 2022

To the State Board of Pharmacy in South Dakota,

We would like to request a variance to the rules 20:51:15:15 and 44:73:08:11 to better supply readily available medications to the residents in the Nursing homes we service. As we utilize these same automated dispensing cabinets in facility's spanning across 5 different states, we would like to stay consistent in our operating procedures.

Our pharmacy typically services facilities in remote locations which many times lack immediate pharmacy services in their respective areas. To minimize delays, we use an automated dispensing cabinet manufactured by Capsa Healthcare called the Nexsys. These cabinets are stored in a locked location within the facility where only the nursing staff will have access. The medications stored in the Nexsys will be the property of the pharmacy and will be audited at least monthly by the pharmacist or pharmacist representative. Each medication is individually packaged and will reference the medication name, strength, lot number and expiration date. These cabinets provide real time medication and supply management to provide residents with STAT or a first dose of medications.

As the Nexsys is fully automated, both the pharmacy and nursing home management is able to track and monitor any transaction in real time or pull reports after a transaction is completed. The Nexsys requires each user to login using unique credentials that is provided by the Director of Nursing. The list of medications is a typical inventory supplied in each machine and is reviewed with the medical director and the facility. Each transaction is electronically time stamped to link the name of the nurse pulling the medication, the residents name, the medication name and strength and quantity pulled. The pharmacy must have a prescription or chart order before any medication is pulled.

When accessing controlled substance from the Nexsys, two nurses are required to each login their credentials before having access to the medication. All controlled substances are stored in individual cells inside the machine and a one-time authorization code is provided by the pharmacy before they can access the controlled medication. The pharmacy verifies that the resident has an active prescription before providing the authorization code to the nursing staff. All controlled substances pulled will require two nurses to back count the remaining quantity and enter that quantity into the software to ensure an accurate count for each medication.

All medications supplied will have minimum and maximum stock on hands to ensure sufficient quantity for the residents and a way to monitor when a medication needs to be replenished.

Thank you for your consideration. Please let me know if you have any questions or concerns.

Sincerely,

Jace Muramoto PharmD
Continued Care Pharmacy
888-277-2132 p
877-231-6468 f

Main Cabinet and 4T

NexsysADC™

patent pending

NexsysADC™
by Capsa Healthcare

NexsysADC**™** is the next–generation medication management system designed for the unique needs of long–term care. NexsysADC provides sophisticated medication and supplies control to enhance patient care and support compliance to medication administration regulations. With NexsysADC installed, facilities always have the right STAT or 1st dose on–hand at the exact time it's needed, and access to controlled medications is secure and trackable.

Intuitive pick–to–light functionality assures simplicity and accuracy during med administration, especially narcotics

NexsysADC is where automated emergency and STAT dose administration meets inventive, commonsense design that provides configurable security and storage for a host of healthcare environments.

NexsysADC meets the highest standards for cyber security and HIPAA compliance (ISO 27001:2013 Certified)

The NexsysADC Controlled Access Module (CAM)

Configurable CAM technology provides illuminated prompts to correct drawer and med compartment, each protected with a clear locking lid to simplify item identity and show available inventory.

Transferable CAM inserts streamline inventory counts, restocking, and medication distribution workflow to and from the pharmacy.

Scalable cabinet design for each facility's unique needs: 1) CAMs for controls; 2) Dividable open-matrix bins for routine meds; 3) Bulk supply drawers.

Adaptable and Scalable Configurations

Every facility's patient population and medication management needs are unique, so each NexsysADC unit is highly adaptable and scalable to manage a few SKUs, up to hundreds. Ask your Capsa Representative or your pharmacy provider for a detailed analysis.

NexsysADC is available in 4T countertop and main cabinet models.

4T cabinet size 23.5"(w) 20.4"(d) 17.7"(h) with 14" touchscreen monitor. Approximately 100 lbs. empty.

Main cabinet size 25"(w) 20.4"(d) 43"(h) with 22" touchscreen monitor. 145 lbs (empty) up to 350 lbs (with 10 CAMs)
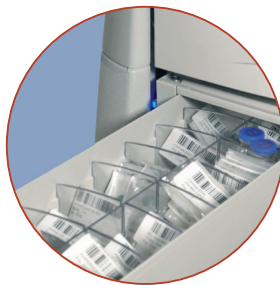
Additional Features Include

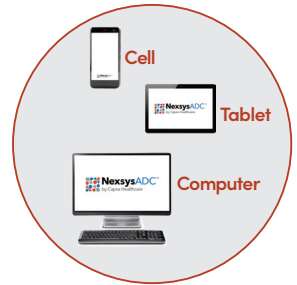Software is designed to be quick, step-saving, and trackable

Advanced security including prox card and biometric authentication

Accommodates virtually all med and supply packaging types

Several options for replenishing meds, all controlled by the pharmacy

Portal access is available 24/7 for nursing & pharmacy management

Item Name	DEA Schedule	Minimum	Maximum
Acyclovir 400mg Tablet	Legend	8	14
Admelog SoloStar 100IU/mL Inj	Legend	1	2
Albuterol HFA 90MCG Inh	Legend	0	2
Albuterol Sulfate 0.083% (2.5mg/3ml) Sol	Legend	0	1
Alendronate 70mg Tablet	Legend	2	4
Allopurinol 100mg Tablet	Legend	5	10
Amitriptyline 10mg Tablet	Legend	5	15
Amlodipine 5mg Tablet	Legend	6	12
Amoxicillin 250mg Capsule	Legend	5	10
Amoxicillin/Clavulanate 875/125mg Tab	Legend	5	10
Ampicillin/Sulbactam 1.5g Powder for Injection	Legend	3	5
Atenolol 25mg Tablet	Legend	5	10
Atorvastatin 10mg Tablet	Legend	7	15
Atorvastatin 40mg Tablet	Legend	6	12
Atropine Sulfate 1% Opht	Legend	0	1
Azithromycin 250mg Tablet	Legend	8	14
Baclofen 10mg Tab	Legend	7	15
Benztropine 0.5mg Tablet	Legend	6	10
Breo Ellipta 100/25mcg Inh	Legend	0	1
Breo Ellipta 200/25mcg Inh	Legend	0	1
Budes/Form 160-4.5mcg/act Inh	Legend	0	1
Bumetanide 0.5mg Tablet	Legend	6	12
Bupropion SR 150mg Tablet	Legend	6	10
Buspirone 5mg Tablet	Legend	7	15
Calcium Acetate 667mg Capsule	Legend	5	7
Carbamazepine 200mg Tablet	Legend	8	16
Carbidopa/Levodopa 25/100mg Tablet	Legend	7	15
Carvedilol 12.5mg Tablet	Legend	8	16
Carvedilol 3.125mg Tablet	Legend	10	20
Cathflo Activase 2mg Vial	Legend	0	1
Cefazolin 1g Vial	Legend	4	6
Cefdinir 300mg Capsule	Legend	5	10
Cefepime 1g Vial	Legend	3	5
Ceftriaxone 1g Vial	Legend	2	6
Cefuroxime 250mg Tablet	Legend	5	10
Celecoxib 100mg Capsule	Legend	6	12
Cephalexin 250mg Capsule	Legend	10	20
Cholestyramine 4g Powder	Legend	4	10
Ciprofloxacin 250mg Tablet	Legend	7	15
Citalopram 10mg Tablet	Legend	8	15
Clarithromycin 250mg Tablet	Legend	5	10
Clindamycin 150mg Capsule	Legend	5	10
Clonidine 0.1mg Tablet	Legend	7	15
Clopidogrel 75mg Tablet	Legend	7	15
Colchicine 0.6mg Tablet	Legend	8	14
Cyclobenzaprine 5mg Tablet	Legend	7	15

Diclofenac 1% Topical Gel	Legend	0	1
Digoxin 0.125mg Tablet	Legend	7	15
Diltiazem 120mg ER Capsule	Legend	6	12
Diltiazem 180mg ER Capsule	Legend	4	12
Diphenhydramine 50mg/ml Vial	Legend	1	2
Divalproex Sodium 250mg Delayed-Release Tablet	Legend	6	20
Divalproex Sodium 250mg ER Tab	Legend	6	20
Donepezil 5mg Tablet	Legend	7	15
Doxycycline 100mg Tablet	Legend	7	15
Duloxetine 30mg Capsule	Legend	7	15
Eliquis 2.5mg Tablet	Legend	7	15
Enoxaparin 30mg/0.3ml Syr	Legend	2	4
Enoxaparin 40mg/0.4ml Syr	Legend	2	4
Epinephrine 1:1000 Amp	Legend	1	2
Ertapenem 1g Vial	Legend	2	3
Escitalopram 10mg Tablet	Legend	5	10
Famotidine 20mg Tablet	Legend	5	10
Finasteride 5mg Tablet	Legend	5	10
Fluconazole 100mg Tablet	Legend	7	15
Fluoxetine 10mg Capsule	Legend	7	15
Fluticasone 50mcg/actuation Nasal Spray	Legend	0	1
Furosemide 20mg Tablet	Legend	7	15
Gabapentin 100mg Capsule	Legend	7	20
Gabapentin 300mg Capsule	Legend	8	16
Gentamicin Sulfate 0.3% Opht	Legend	0	1
Glipizide 5mg Tablet	Legend	5	10
Glucagon Emergency Kit 1mg	Legend	1	2
Haloperidol 5mg/mL Vial	Legend	2	3
Haloperidol 2mg/ml Sol	Legend	0	1
Haloperidol Dec 50mg/ml Inj	Legend	0	1
Heparin 5000unit/mL Vial	Legend	5	10
Humulin R 100units/ml Vial	Legend	1	2
Hydralazine 10mg Tablet	Legend	7	15
Hydrochlorothiazide 12.5mg Tablet	Legend	7	14
Hydroxyzine HCl 25mg Tablet	Legend	6	10
Imipenem/Cilastatin 500mg Vial	Legend	3	5
Insulin Aspart Flexpen for Inj	Legend	1	2
Insulin Glargine 100 UNITS/ML PEN (3ML)	Legend	1	2
Ipratropium/Albuterol 0.5/3mg/3mL Solu	Legend	1	2
Isosorbide ER 30mg Tablet	Legend	6	14
Lactulose 10g/15ml Solution	Legend	0	1
Lamotrigine 100mg Tablet	Legend	5	10
Lamotrigine 25mg Tablet	Legend	8	14
Lansoprazole 15mg Capsule	Legend	7	14
Latanoprost 0.005% Opht	Legend	1	2
Levemir 100units/ml FlexTouch	Legend	1	2
Levetiracetam 500mg Tablet	Legend	7	14

Levofloxacin 250mg Tablet	Legend	7	14
Levothyroxine 100mcg Tablet	Legend	7	14
Levothyroxine 112mcg Tablet	Legend	5	10
Levothyroxine 25mcg Tablet	Legend	7	14
Levothyroxine 88mcg Tablet	Legend	6	12
Lidocaine 1% Vial	Legend	1	2
Lidocaine 2% Viscous Solu	Legend	0	1
Lidocaine 5% Patch	Legend	3	5
Lisinopril 20mg Tablet	Legend	8	16
Lisinopril 5mg Tablet	Legend	5	20
Losartan 25mg Tablet	Legend	7	14
Losartan/HCTZ 100/25mg Tablet	Legend	5	10
Lovastatin 20mg Tablet	Legend	6	12
Meclizine 12.5mg Tablet	Legend	7	14
Meloxicam 7.5mg Tablet	Legend	7	14
Memantine 5mg Tablet	Legend	6	10
Meropenem 500mg Vial	Legend	3	5
Metformin EXTENDED 500mg Tab	Legend	6	12
Metformin IMMEDIATE 500mg Tab	Legend	5	10
Methylprednisolone 4mg Tablet	Legend	5	10
Metoclopramide 10mg Tablet	Legend	5	10
Metolazone 2.5mg Tablet	Legend	5	10
Metoprolol ER 25mg Tablet	Legend	5	10
Metoprolol Tart 25mg Tablet	Legend	7	14
Metronidazole 250mg Tablet	Legend	7	14
Midodrine 5mg Tablet	Legend	6	12
Mirtazapine 15mg Tablet	Legend	8	16
Montelukast 10mg Tablet	Legend	7	14
Mupirocin 2% Topical Ointment	Legend	0	1
Naloxone 0.4mg/ml Vial	Legend	1	2
Nitrofurantoin Mono/Macro 100mg Cap	Legend	7	14
Nitroglycerin SL 0.4mg Tablet	Legend	1	2
Nystatin 100,000units/g Powder	Legend	1	2
Olanzapine 5mg Tablet	Legend	6	12
Omeprazole 20mg Capsule	Legend	7	14
Ondansetron 4mg ODT	Legend	6	12
Ondansetron 4mg Tablet	Legend	7	14
Ondansetron 4mg/2ml Vial	Legend	1	2
Oxybutynin 5mg Tablet	Legend	7	10
Oxybutynin ER 5mg Tablet	Legend	2	10
Pacerone 200mg Tablet	Legend	6	10
Pantoprazole 40mg Tablet	Legend	7	14
Penicillin VK 250mg Tablet	Legend	5	10
Phenazopyridine 200mg Tablet	Legend	5	10
Phenytoin ER 100mg Capsule	Legend	5	10
Phytonadione 5mg Tablet	Legend	1	2
Piperacillin/Tazo 2.25g Vial	Legend	3	5

Piperacillin/Tazo 3.375g Vial	Legend	3	5
Polymyxin B Sulfate/Trimethoprim Opht	Legend	1	2
Potassium Chloride ER 10mEq Tab	Legend	7	14
Pramipexole 0.125mg Tablet	Legend	8	14
Pramipexole 0.5mg Tablet	Legend	6	12
Pravastatin 10mg Tablet	Legend	7	14
Prednisone 20mg Tablet	Legend	5	10
Prednisone 5mg Tablet	Legend	7	14
Primidone 50mg Tablet	Legend	7	14
Prochlorperazine 10mg Tablet	Legend	4	10
Prochlorperazine 25mg Rectal Supp	Legend	2	6
Promethazine 25mg Tablet	Legend	5	10
Promethazine 25mg/ml Vial	Legend	1	2
Propranolol 10mg Tablet	Legend	7	14
Quetiapine 25mg Tablet	Legend	7	12
Quetiapine 50mg ER Tablet	Legend	6	12
Risperidone 0.25mg Tablet	Legend	8	16
Risperidone 1mg Tablet	Legend	6	16
Ropinirole 0.25mg Tablet	Legend	7	14
Rosuvastatin 10mg Tablet	Legend	6	12
Sertraline 25mg Tablet	Legend	7	14
Sevelamer Carbonate 800mg Tablet	Legend	8	14
Simvastatin 10mg Tablet	Legend	7	16
Solu-Medrol 125mg Vial	Legend	2	4
Spiriva 18mcg HandiHaler	Legend	0	1
Spironolactone 25mg Tablet	Legend	7	14
SPS 15g/60ml Suspension	Legend	2	4
Sterile Water for Injection	Legend	1	2
Sulfamethoxazole/Trim 800/160mg Tab	Legend	7	15
Tamsulosin 0.4mg Capsule	Legend	7	14
Tizanidine 2mg Tablet	Legend	8	14
Torsemide 10mg Tablet	Legend	8	14
Trazodone 50mg Tab	Legend	7	14
Valsartan 80mg Tablet	Legend	6	12
Vancomycin 25mg/ml Solution	Legend	1	2
Vancomycin 500mg Vial	Legend	3	5
Vancomycin 750mg Vial	Legend	3	5
Vancomycin Injection 2gm/400ml	Legend	1	2
Venlafaxine 37.5mg Tablet	Legend	5	10
Venlafaxine ER 37.5mg Capsule	Legend	5	10
Warfarin 1mg Tablet	Legend	10	20
Warfarin 2.5mg Tablet	Legend	10	20
Xarelto 10mg Tablet	Legend	5	10
Xarelto 15mg Tablet	Legend	4	10
Cefepime 2g Vial	Legend	3	5
Fluticasone/Salmeterol 250/50mcg Diskus	Legend	0	1
Oseltavmivir 75mg Cap	Legend	5	10

Item Name	DEA Schedule	Minimum	Maximum
Scopolamine 1.5 mg Patch	Legend	1	2
Vancomycin 1.5g/300ml IV bag	Legend	1	5
Vancomycin 1g/200ml IV bag	Legend	3	4
Item Name	DEA Schedule	Minimum	Maximum
Fentanyl 12mcg/hr Transdermal Patch	Schedule II	2	5
Fentanyl 25mcg/hr Transdermal Patch	Schedule II	1	4
Fentanyl 50mcg/hr Transdermal Patch	Schedule II	2	5
Hydrocodone/APAP 10/325mg Tablet	Schedule II	10	20
Hydrocodone/APAP 5/325mg Tablet	Schedule II	10	20
Hydrocodone/APAP 7.5/325mg Tablet	Schedule II	10	20
Hydromorphone 2mg Tablet	Schedule II	10	20
Methadone 5mg Tablet	Schedule II	5	10
Morphine ER 15mg Tablet	Schedule II	5	10
Morphine Sulfate 100mg/5ml (20mg/ml) Sol	Schedule II	1	2
Oxycodone 100mg/5mL Solu	Schedule II	0	1
Oxycodone IMMEDIATE RELEASE 5mg Tablet	Schedule II	10	20
Oxycodone/APAP 5/325mg Tab	Schedule II	10	20
Oxycodone/APAP 7.5/325mg Tab	Schedule II	10	20
Oxycontin EXTENDED RELEASE 10mg Tablet	Schedule II	10	20
Alprazolam 0.25mg Tablet	Schedule IV	5	10
Clonazepam 0.5mg Tablet	Schedule IV	10	20
Diazepam 50mg/10mL Vial	Schedule IV	0	1
Diazepam 5mg Tablet	Schedule IV	5	10
Lorazepam 0.5mg Tablet	Schedule IV	10	20
Temazepam 7.5mg Capsule	Schedule IV	8	14
Tramadol 50mg Tablet	Schedule IV	10	20
Zolpidem 5mg Tablet	Schedule IV	5	10
Lyrica 25mg Capsule	Schedule V	5	10
Pregabalin 100mg Capsule	Schedule V	6	12