

Introduction to Communicable Disease Surveillance and Investigation in North Carolina



North Carolina Pharmacy Law for Local Health Department Nurses

Amanda Fuller Moore, PharmD



Objectives

- Explain the difference between medication administration and medication dispensing
- Describe the 3 conditions that must be met before a R.N. may dispense medications
- Relate the only circumstance that may allow non-pharmacist to dispense medications without meeting the nurse dispensing rules
- Discuss the purpose of the 340B Drug Pricing Program as it relates to STD and TB drugs

Administration vs. Dispensing

From the North Carolina Pharmacy Practice Act (90-85.3. Definitions)

"Administer" means the direct application of a drug to the body of a patient by injection, inhalation, ingestion or other means.

"Dispense" means preparing and packaging a prescription drug or device in a container and labeling the container with information required by state and federal law. Filling or refilling drug containers with prescription drugs for subsequent use by a patient is "dispensing". Providing quantities of unit dose prescription drugs for subsequent administration is "dispensing".

Administration vs. Dispensing

- Administration occurs when a patient is given a oral medication to take immediately, is injected with a medication, or otherwise provided a medication that is used right away
- Dispensing occurs when a patient is given a medication to take off site and use later

3 Steps to Registered Nurse Dispensing

- Secure the services of a N.C. registered pharmacist to serve as pharmacy manager and maintain pharmacy permit
- Pharmacy manager will train R.N.s to dispense
- Pharmacist must be in health department to retroactively review dispensing records. Pharmacy manager shall be personally responsible for compliance with all statues, rules, and regulations governing the practice of pharmacy and dispensing of drugs.

Registered Nurse Dispensing Facts

- Applies only to Registered Nurses
 - LPN's, etc. cannot be trained to dispense
- A dispensing R.N. must be trained by a registered pharmacist
- Prescription orders are required
- Labeling must meet requirements
- The person to whom the prescription is dispensed must be a patient of the health department
- More information:
<http://publichealth.NC.gov/lhd/>

Denise Perry – denise.perry@wakegov.com

Registered Nurse

Dispensing Facts, Continued

- R.N. dispensing is limited to those medications listed in 21 NCAC 46.2403 for specific indications for health department patients
 - Anti-tuberculosis
 - Anti-infectives for STD's as specified by CDC
 - Natural or synthetic hormones or contraceptive devices for pregnancy prevention
 - Topicals for lice, scabies, impetigo, diaper rash, vaginitis, and related skin conditions
 - Vitamins and minerals
- Dispensing of controlled substances of any kind is prohibited by the statute

Dispensing During Emergencies

§ 90-85.25. Disasters and emergencies.

(a) In the event of an occurrence which the Governor of the State of North Carolina has declared a state of emergency, or in the event of an occurrence for which a county or municipality has enacted an ordinance to deal with states of emergence under G.S. 166A-19.31, or to protect the public health, safety, or welfare of its citizens under G.S. 160A-174(a) or G.S. 153A-121(a), as applicable, the Board may waive the requirements of this Article in order to permit the provision of drugs, devices, and professional services to the public.

What is 340B Drug Pricing Program?

- Agreement where manufacturers provide discounts to certain entities for outpatient medications
 - Covered entities typically serve vulnerable patient population
- Data to calculate 340B price is confidential
- Studies show 340B prices are 25-50% below average wholesale price
- “Covered entity” is the term given to the healthcare facility qualifying for 340B pricing

340B Drug Pricing Program

- Each local health department has multiple 340B accounts
 - <http://opanet.hrsa.gov/opa/CESearch.aspx> to lookup 340B ID numbers
- Each account and contract pharmacy is re-certified annually
- Covered entity must have a relationship with the patient it dispenses medications
- 340B drug inventory must be maintained separately
- Transfer of medication between covered entities is not permitted
- Full summary of HRSA guidance:
<http://www.hrsa.gov/opa>