

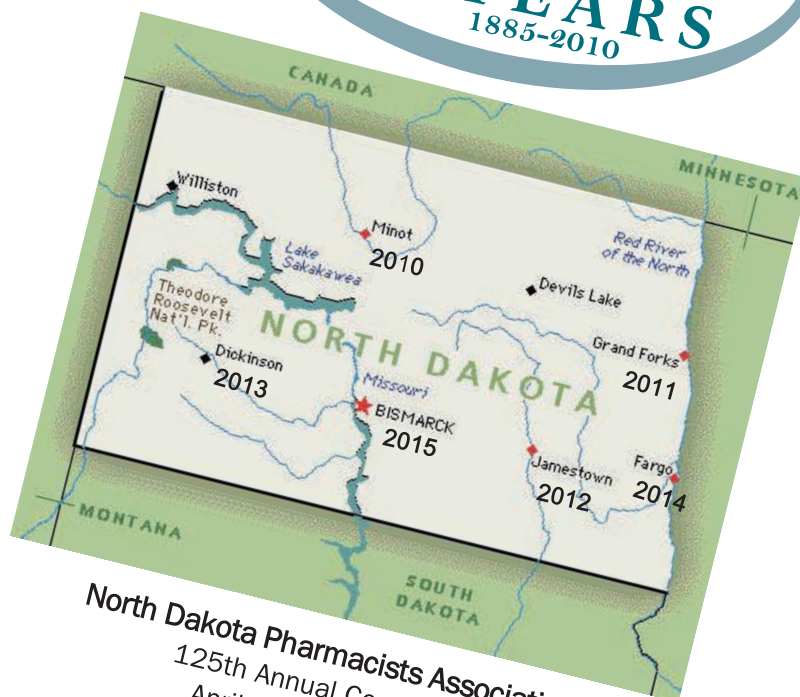
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PHARMACY

Volume 23, No.1

March 2010

A Voice for *Pharmacy* Since 1885



North Dakota Pharmacists Association
125th Annual Convention
April 23-24-25, 2010
Minot, North Dakota

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NDSU College of Pharmacy/ ASP Representative

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Mark Your Calendar

April

April 22 –25, 2010
NDPhA 125th Annual Convention
Minot ND

May

May 2-6, 2010
NCPDP Annual Conference
Phoenix AZ

May 14, 2010
NDSU Hooding & Graduation
Fargo ND

May 10-12, 2010
NCPA Legislative Conference
Washington DC

May 26-28, 2010
ASCP Midyear Meeting
Phoenix AZ

June

June 6-9, 2010
ASHP Summer Meeting
Tampa FL

July

July 10-14, 2010
AACP Annual Meeting
Seattle WA

July 17-18, 2010
Dakota Drug Trade Show
Fargo Civic Center, Fargo ND

August

August 28-31, 2010
NACDS Pharmacy & Technology Conference
San Diego CA

October

October 2, 2010
NDSU Homecoming—GOOOOO Bison!

October 13-16, 2010
AMCP Education Conference
St Louis MO

October 17-20, 2010
ACCP Annual Meeting
Austin TX

October 23-24, 2010
NASPA Fall Meeting
Philadelphia PA

October 23-27, 2010
NCPA Annual Convention
Philadelphia PA

November

November 10-13, 2010
ASCP Annual Meeting
Orlando FL

Michael Schwab, Executive Vice President

Dear Potential Member,

Today, pharmacists are on the forefront of health care reform. I invite you to join the ND Pharmacists Association (NDPhA) and become an active member and contributor to furthering the pharmacy profession in North Dakota. Now more than ever, it is critical for you to play a part in defining the role of pharmacists in North Dakota.

From helping to implement new practice initiatives, providing free/discounted CE opportunities, to providing individual and systemic advocacy, the ND Pharmacists Association has been actively involved in the profession of pharmacy at a federal, state and local level. We will continue to work with policymakers, the ND State Board of Pharmacy, the FDA, DEA, CMS, NDSU College of Pharmacy and other entities on behalf of the profession of pharmacy in ND.

We are asking for your help and would love for you to join us in helping shape the future of pharmacy. It cannot be done alone, your help is being requested and we are encouraging you to participate regardless of your individual practice setting or affiliation. Membership in the ND Pharmacists Association is very reasonable and the cost associated with joining is one of the lowest in the country. There is a discounted rate provided to all NDPhA members for our State Annual Convention as well.

Please visit our website at www.nodakpharmacy.net for additional information. An application for membership is on the next page of the Journal. Please call our office if you have any questions. Again, we are asking for help and looking for leaders! Many of your colleagues have already joined. Thanks in advance for your consideration.

"There are risks and costs to action. But they are far less than the long-range risks of comfortable inaction."

JFK

Respectfully,
Mike Schwab

NDPhA *DSM Coordinator's Update*

Jayne Steig, PharmD RPh

DIABETES DSM PROGRAM UPDATE PAT YOURSELF ON THE BACK

At Frontier Pharmacy, we often send you email or fax you with requests. We understand these can be burdensome and sometime make you wonder why you ever decided to participate in this program. I'd like to take this time to show you what you've accomplished....which is a lot and is something in which you should all take great profession pride.

Look at what your patients have to say.....

Excellent program – thank you!

My diabetes has improved at least 50%

This is an amazing program and it has helped me immensely

Very helpful!

I wish this program would have been available 10-20 years ago

These are just a few of the comments from members participating in the diabetes management wellness program. Our patient satisfaction surveys indicate a high level of satisfaction with your services. Just look at what you're doing.

Not only are your patients highly satisfied with the care you are providing, their health is improving as well. Looking at data through December 31, 2009, including both the NDPERS and CHAND participants, you have seen 376 patients a total of 1683 times. Your average patient has 6 medical conditions, takes over 10 medications, and you identified over 3 medication-related problems. The average patients Hemoglobin A1C entering the program was 7.26. It is now 7.01. Approximately one-third of those who entered the program with an A1C above 7 are now below 7. Similar improvements have been found in cholesterol, triglycerides, and blood pressure. Again....just look at what you're doing.

In our busy practices, we don't often get the chance to take a step back and look at what we've done. We can often feel unappreciated. I want to say THANK YOU for your efforts and to let you know how much you are appreciated and how valuable your contributions are to the health of your patients.

REMEMBER....IT'S ALL ABOUT THE PATIENT.



APPLICATION FOR MEMBERSHIP IN NDPhA

JANUARY 1—DECEMBER 31, 2010

Full Name: _____

Home Address: _____

City, St, Zip: _____

Home Ph: _____

Business Name: _____

Business Address: _____

Business Ph: _____

Fax: _____

City, St, Zip: _____

Prefer Mail Go To: ☐ Business ☐ Home

Email: _____

Would you like to receive email updates from NDPhA?

☐ Yes ☐ No

Legislative District _____

ND License # _____ Year Graduated _____

Pharmacy School _____

Practice Setting

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Chain | <input type="checkbox"/> Manufacturer/Distributor |
| <input type="checkbox"/> Educator | <input type="checkbox"/> Non-Pharmacy |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Other |
| <input type="checkbox"/> Independent | |
| <input type="checkbox"/> Owner | |
| <input type="checkbox"/> Employee | |

Academies

Select one:

☐ Community Practice Academy (CPA)

I am interested in an academy for:

- ☐ Health-system Practice Academy (HPA) *this academy has been proposed to be added during the 125th Annual Convention in 2010*
- ☐ Long-term Care/Consultant
- ☐ Nuclear
- ☐ Compounding
- ☐ Student
- ☐ Other _____

Membership Categories

- ☐ Active Member (ND Licensed Pharmacists) \$100
- ☐ Corporate Member (Having a business interest in Pharmacy) \$750
- ☐ Associate Member (Spouse member, Out-of-State Pharmacist, Retired/Inactive) \$50
- ☐ Student Member Free of Charge

Optional Association Support

- ☐ Contribution to NDPhA Political Action Committee (PAC) (**Cannot be Corporate Checks**)
Amount _____
- ☐ Contribution to the Pharmacy Advancement Corporation (PhAC) NDSU Scholarship Fund (**These funds are used entirely to provide scholarships to NDSU College of Pharmacy Students. Personal or Corporate Checks are accepted.**)
Amount _____

Payment

Mail or Fax to:
NDPhA
1641 Capitol Way
Bismarck ND 58501-2195
Fax: 701-258-9312

☐ Check Enclosed Amount _____

☐ Charge my card this year only

☐ **Automatically renew my membership annually by charging my card**

Name on Card: _____

Type (check one): ☐ Visa ☐ MasterCard

Credit Card # _____

Expiration Date _____

CVV _____

(3 digit code on the back of card)

PLEASE MAKE A COPY FOR YOUR RECORDS AND MAIL OR FAX TO:
NDPhA, MEMBERSHIP BENEFITS, 1641 CAPITOL WAY, BISMARCK ND 58501-2195 FAX: 701-258-9312

STUDENT AUCTION DONATION FORM

PLEASE PRINT THE INFORMATION REQUESTED BELOW AND RETURN TO:
PhAC AUCTION, NDPhA, 1641 Capitol Way, Bismarck, ND 58501-2195
Fax: 701-258-9312 Ph: 701-258-4968 email: ndpha@nodakpharmacy.net

DONOR Name

ADDRESS (City, St, Zip)

EMAIL ADDRESS

PHONE

ITEM

QUANTITY

DOLLAR VALUE

ITEM

QUANTITY

DOLLAR VALUE

DELIVERY IS THE RESPONSIBILITY OF THE DONOR.
Items are appreciated by 10:00 AM-Saturday, April 24.

The auction will be held on **Saturday, April 24, 2010**
Grand International Inn – Minot, North Dakota
www.internationalinn.com
1505 North Broadway, Minot, ND 58703-0777



The Pharmacy Advancement Corporation Scholarship Annual Auction will be held Saturday April 24, 2010 after the President's Banquet during the NDPhA convention at the Grand International Inn, Minot. The auction committee would like to invite everyone to participate by donating items. The North Dakota Pharmacists Association is celebrating 125 years so come on you woodcrafters, quilters, and other artisans help us celebrate this momentous occasion. As in years past, several items will be placed on a silent auction with the highlight of the evening being the "live" auction. Please forward any questions to Lorri at ndpha@nodakpharmacy.net or call 701-258-4968. Thank you for your participation in the past and we look forward to another outstanding auction.

Friday April 23, 2010

*Wear your NDSU Bison or College of Pharmacy Gear on Friday .
If you don't have something in your closet, stop by the ASP Booth,
give them a little support and pick out something new!*

7am-6pm	Registration LOBBY
7-8am	Breakfast (Keycare Pharmacy, B&B/Northwest Pharmacy & Trinity Hospital Pharmacy)
8-9:30am	Stroke: Antithrombotic & Related Treatment Strategies (0.15 CEU) Dr. Levine, Senior Stroke Neurologist, University of Wisconsin Stroke Center UPN: 0047-9999-10-107-L01-P
9:30-10:30am	Prescription Abuse and Fraud (0.1 CEU) Brendan Joyce, North Dakota Medicaid Services UPN: 0047-9999-10-106-L04-P; 0047-9999-10-106-L04-T
10:30-11am	Break
11-12:00pm	Tomorrow's Health Care System & Your Role in Pharmacy (0.1 CEU) Larry Ellingson, R.Ph./Former VP, Eli Lilly, Fountain Hills, AZ UPN: 0047-9999-10-108-L04-P; 0047-9999-10-108-L04-T
10am-1pm	Exhibitor Theatre
12-1pm	Lunch
1-2pm	Chronic Pain: Nuts and Bolts of Opioid Therapy (0.1 CEU) Robert Sylvester, Pharm.D., Meritcare Oncology/NDSU College of PNAS, Fargo, ND UPN: 0047-9999-09-110-L01-P
2-3pm	Update on North Dakota Telepharmacy Project (0.1 CEU) Shelley Johnsen, Director Hospital Telepharmacy Project, Fargo Ann Rathke, Telepharmacy Coordinator, NDSU College of PNAS UPN: 0047-9999-09-116-L04-P
2-3pm	What's in the Belly-Fat? The Metabolic Middle Syndrome (0.1 CEU) Janet Maxon, NP, Bismarck/Minot Health UPN: 0047-9999-09-115-L01-P
3-3:30pm	Ice Cream Social (Dakota Drug)
3:30-4pm	Welcome & Presentation of Flag
4:30-6pm	First NDPhA Business Meeting (0.05 CEU) UPN: 0047-9999-10-116-L04-P; 0047-9999-10-116-L04-T
6-6:30pm	Social
6:30pm	President-Elect Banquet (McKesson) Awards Ceremony Self Care Challenge (0.1 CEU) UPN: 0047-9999-10-119-L01-P

Faculty VS Students
Who will win?



Saturday April 24, 2010

7am-6pm	Registration
7-8am	Breakfast (Thrifty White)
8-10am	Who Are You? A Leader? (0.2 CEU) Ernest Anderson, System Vice President of Pharmacy, Caritas Christi Health Care, Brighton, MA UPN: 0047-9999-10-109-L04-P; 0047-9999-10-109-L04-T
10-11am	New Rules on the Way (0.1 CEU) Howard Anderson, Jr. R.Ph. Exec. Director, Board of Pharmacy UPN: 0047-9999-10-111-L03-P; 0047-9999-10-111-L03-T
10-11am	Motivate, Advocate, Educate: Transform the Way You Provide Diabetes Care (0.1 CEU) Michelle Hoppman, RD, CDE, Trinity Health, Minot, ND UPN: 0047-9999-09-111-L01-P
11-12am	Second NDPhA Business Meeting (0.025 CEU) UPN: 0047-9999-10-117-L04-P; 0047-9999-10-117-L04-T
12-1:30pm	Lunch and Meeting (NDPhA, NAPT, NDSHP)
1:30-2:30pm	Alternative Medicine: A Pharmacist Perspective (0.1 CEU) Steve Burnside, RPh, Natural Health Shoppe, Minot, ND UPN: 0047-9999-10-115-L01-P
1:30-2:30pm	Ergonomics for Pharmacy Profession - to bend or not to bend Karen Rasmusson, First Choice Physical Therapy, Minot, ND UPN: 0047-9999-10-113-L04-P; 0047-9999-10-113-L04-T
2-3pm	Public Hearing
2:30-3:30pm	Immunization Update (0.1 CEU) Tatia Hardy, Immunization Director, ND Department of Health, Bismarck, ND UPN: 0047-9999-10-112-L01-P
2:30-3:30pm	Preceptor Pearls- Technology and Resources (0.1 CEU) Wanda Roden, Director APPE, College of Pharmacy Rebecca Focken, Director IPPE, College of Pharmacy UPN: 0047-9999-10-110-L04-P
3:30-4:30pm	Third NDPhA Business Meeting (0.025 CEU) UPN: 0047-9999-10-118-L04-P; 0047-9999-10-118-L04-T
5-6pm	Phun Run/Walk MEET IN LOBBY
6:30-7pm	Past President's Reception
6:30-7PM	Social Hour
7pm	President's Banquet (Dakota Drug) Awards Ceremony Pharmacy Advancement Corporation Student Scholarship Auction



Sunday April 24, 2010

7:30-8am **Breakfast**

8-8:45am **Memorial Service**

9-10:30am **Current Concepts in Managing Pharmaceuticals: From 797 to NIOSH to RCRA (0.15CEU)**

Fred Massoomi- PharmD, FASH,
Nebraska Methodist Hospital, Omaha
UPN: 047-9999-09-108-L04-P

10:30-11:30am **Preceptor Pearls- Best Practices (0.1 CEU)**

Wanda Roden, Director APPE, NDSU College PN & AS
Rebecca Focken, Director IPPE, NDSU College PN & AS UPN: 0047-9999-10-114-L04-P

Adjourn

**Safe Travels Home &
See You Next Year in Grand Forks
June 10-12, 2011**



Program designation of "P" signifies that this program was specifically developed for pharmacists.
ACPE Continuing Education credit is applicable for pharmacy technician and nursing also.

"The College of Pharmacy, Nursing, and Allied Sciences, North Dakota State University, is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education."

Continuing Education Credit:

A statement of credit will be mailed to those participating in the program within 4-6 weeks. Satisfactory completion will be assessed by completion of an attendance roster and an evaluation of learning.



April 22-25, 2010

Grand International www.internationalinn.com

1505 North Broadway, Minot, ND 58703-0777

To Reserve a room Call: 701-852-3161 or 800-735-4493

Name: _____

Mailing Address: _____
City _____ **St** _____ **Zipcode** _____

Phone: _____

Email: _____

Spouse/Guest

Registration Fees:

Entire Convention:

POSTMARKED	Before April 7	After April 7
Pharmacist	\$150	\$200
Member Technician	\$70	\$100
Non Member Pharmacist	\$300	\$350
Non Member Technician	\$140	\$200
Student (Pharmacist/Technician)	\$50	\$75
Student Sponsor	\$50	
Spouse/Guest	\$70	

Single Day: (circle day) **Friday** **Saturday** **Sunday**

POSTMARKED	Before April 7	After April 7
Member Pharmacist	\$85	\$100
Member Technician	\$35	\$40
Non Member Pharmacist	\$150	\$200
Non Member Technician	\$75	\$100
Spouse/Guest	\$35	

Registration Total _____

Make Checks Payable to:

NDPhA 2010 Annual Convention

Mail Completed Forms and Payment to:

NDPhA

1641 Capitol Way

Bismarck ND 58501-2195

PLEASE MAKE YOUR MEAL SELECTIONS

Banquets:

Friday: Stuffed Pork Chop Walleye

Saturday: Prime Rib Shrimp

Saturday Luncheon: (select one)

NAPT

NDPhA

NDSHP

(If registering for more than one person, note selections here: _____)

Or Fax Credit Card Payment to: 701-258-9312

Type of Card (Circle One) Visa Mastercard

Credit Card Number

/ /

Expiration Date

Zipcode on Billing Address

CVV (3 digit # on Back of card)

Signature: _____

Goal: of this program is to provide the participants with continuing pharmacy education relating to the practice of pharmacy.
Target Audience: The programs are intended for community, hospital, clinical, consultant, and research pharmacists, as well as pharmacy technicians. It is also appropriate for any health care professional/practitioner with an interest in topics presented.

Objectives:

Business meetings:

Explain the new law on membership, proposed changes, and why changes are needed
Discuss Continuing Education requirements for pharmacists and Technicians and explain carryover provisions
Describe e-signature and explain when ND law and DEA regulations require a signature

Rx Fraud and Abuse

Correctly identify some common types of fraud in Medicaid
Identify areas of improvement to avoid fraud and waste within your practice area
Determine a logical approach to dealing with suspected abuse and identifying patterns of abuse

Stroke Management

recognize the various components that make up the clinical spectrum of stroke/cerebrovascular disease (CVD)
explain the therapeutic options as we treat patients in these various stages of CVD

Tomorrow's Healthcare System

Explain some major issues facing health care reform;
Discuss the implications of living longer and costs to our health care system;
Discuss the impact of the acute care model verses chronic care model and role of the pharmacist;
Outline some next steps to get ready for change to a community care/ patient centric model of care.

Palliative Care/Oncology:

apply pharmacokinetic, pharmacodynamic and pharmacoeconomic principles in the selection and management of a patient's opioid therapy
appropriately assess the efficacy of a patient's response to opioid therapy
calculate equianalgesic doses of frequently used opioids
calculate appropriate "breakthrough doses" of opioids
counsel patients on the effective management of opioid-induced adverse effects.

Telepharmacy

Explain the importance and function of the hospital telepharmacy project and it's impact on improving patient care and safety
Discuss techniques used in implementation of the project.

Metabolic Syndrome

Describe the dysmetabolic functions in Metabolic Syndrome
Explain how to manage individual risks for cardiovascular diseases in Metabolic Syndrome

Self Care Challenge

Identify and explain aspects of the effective and safe practice of pharmacy self-care treatments.
Analyze the usage and effectiveness of over the counter medications.
Classify different groups of over the counter medications based on drug treatment class.

Who are You?

Name the 4 components of inside-out leadership
Identify the 4 quadrants of Covey's Time Management Matrix
List a minimum of 4 attributes of a manager and 4 attributes of a leader

Preceptor I:

Identify the important features of EValue, the new electronic rotation management system used by NDSU.
Collaborate with other pharmacists/preceptors to identify ways to use technology and online resources to improve student learning.
Develop strategies to motivate students to achieve desired learning outcomes.

Diabetes Management

Explain the data collected through the program, current program status, future development
Discuss case studies presented, discuss treatment options, share your own experience

Alternative Medicine:

Explain the difference between natural and synthetic supplements
Discuss how the pharmacist can play a role in patient care using alternative medicine

Law Update:

Explain how USP 795 and new non-sterile rules will impact your practice
Explain how USP 797 and new rules will impact your practice
Discuss why positive ID is necessary for controlled substance prescriptions

Describe how to use PDMP reports to benefit your patients

Immunization:

Discuss an overview of the 2009-2010 novel H1N1 influenza situation in North Dakota.
Describe the current pediatric vaccines recommended in North Dakota and the diseases they prevent.
Explain the myths and controversies often associated with vaccines.

Ergonomics:

Explain Ergonomic principles
Identify correct working postures
Discuss Ergonomic modifications for the workplace
List Exercises to be done on the job

USP 797:

Summarize current USP 797 standards for sterile compounded drugs and hazardous drugs
Explain safe hazardous drug practice
Describe applications of the Resource Conservation and Recovery Act to the disposal of pharmaceutical and hazardous waste
Identify effective "Green" practices for management of pharmaceutical waste that you can apply in your institution

Preceptor II:

Identify and share experiential education best practices.
Collaborate with other pharmacists/preceptors to incorporate best practices into student rotation activities for Introductory and Advanced Pharmacy Practice Experiences.
Develop strategies to motivate students to achieve desired learning outcomes.



Do you have a safety net?

All quality assurance (QA) and safe medication practices programs are NOT the same!
Make sure your safety net comes with the strength and protection of a Patient Safety Organization!

Protect your patients AND your pharmacy!

Pharmacies that license the Pharmacy Quality Improvement™ and report patient safety events are now provided federal legal protection to information that is reported through the Alliance for Patient Medication Safety (APMS) – A Patient Safety Organization. To learn about PSOs visit www.pso.ahrq.gov/psos/fastfacts.htm.

Pharmacy Quality Commitment™ (PQC)

- Helps you improve efficiency and increase patient safety
- Easy-to-use tools to collect and analyze medication near miss and error data
- Meets demands for safe medication practices and QA programs
- Protects reported data through APMS, a federally listed PSO

Pharmacy Quality™
COMMITMENT

Call toll free (866) 365-7472 or visit
www.pqc.net for more information.

PQC is brought to you by your state pharmacy association.

2010 (First Quarter)

1985—Twenty-five years ago:

AIDS test for blood approved by FDA in its first major action to protect patients from infected donors.

The Kroger Company of Cincinnati outbid Rite Aid for the Hook's Drug Stores chain of Indianapolis and combined it with their Super-Rx units.

First oral drug approved to prevent/reduce recurrent outbreaks of genital herpes Zovirax (Burroughs Wellcome)

1960—Fifty Years Ago:

5-year BS implemented as the minimum standard for U.S. colleges of pharmacy.

Eugene White of Berryville, VA opened an office based pharmacy that stressed relationships with patients and utilized formal patient prescription monitoring.

1935—Seventy-five Years Ago:

First reports of the clinical effectiveness of Gerhard Domagk's new medicine [Prontosil] for infections appear

Formulary of the University Hospital, University of Michigan developed by Harvey A.K. Whitney, Sr.

1910—One hundred Years Ago:

First Pharmaceutical Syllabus issued providing the basic course of study for the 2-year PhG and providing a more objective basis for licensure examinations and reciprocity.

Founding of Arizona Pharmaceutical Association

Phi Delta Chi ratifies the change of its name from Phi Chi to avoid confusion with Phi Chi Medical Fraternity

By: Dennis B. Worthen Lloyd Scholar, Lloyd Library and Museum, Cincinnati, OH



NAPT *Board of Directors*

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NAPT Parliamentarian

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College of Science
Work #: 701.671.2114
Email: barbara.lacher@ndscs.edu

NAPT Member-At-Large

Melissa Heley
Employer:
Work #: 701.235.8002 ext 207
Email:
mheley@csmOnDemand.com

NAPT Member-At-Large

Kerri L. Ring
Employer: Pharmacy
Work #: 701.857.7900
Email: kring@srt.com

Immediate Past President

Jodi Hart
Employer: St. Alexius Inpatient Pharmacy
Work #: 701.530.6904
Email: jhart@bis.midco.net

Presidents Report by Angela Buchanan, RPhT

Hello fellow Pharmacy Technicians!

I would like to apologize to each and every one of you for not thanking you for your hard work and efforts in the Profession of Pharmacy on National Pharmacy Technician Day. I take full responsibility for the error. The gift purchased by the Executive Board will be given out at the NDPhA Convention. Again, my apologies to each of you.

We are looking to fill a couple of positions on the Executive Board for 2010 - 2011. The open positions will be Vice President/President-Elect, Secretary and Treasurer. If you would like further information about these positions or would like to add your name to the list, please contact any of the Executive Board members.

I hope all of you are having a great start in 2010 and are looking to attend the NDPhA Convention in Minot.

It's that time of year for nominating an individual or company who has been an outstanding achiever in the Practice of Pharmacy and excels in the criteria of each specific award. The awards and minimum criteria are listed on the next page.

The nominator shall prepare a letter of recommendation listing the outstanding achievements of the nominee. The nominator shall also include the name of the award they are making a nomination for.

The nominator shall send the letter of recommendation to the attention of **NAPT Vice President Josie Olson** at josierae@yahoo.com. **DEADLINE - March 20th, 2010.**
NAPT Annual Awards to be presented at the NDPhA Convention

Pharmacy Technicians

Pharmacy technician for hybrid pharmacy including retail prescription department, compounding lab and nutritional center.

One Saturday a month - no Sundays.

Call Kevin at Dakota Pharmacy, **701-255-1881**

Pharmacy Technician Awards

DISTINGUISHED YOUNG PHARMACY TECHNICIAN:

Minimum Selection Criteria

Practicing as a Pharmacy Technician for less than 10 years.

Registered as a Pharmacy Technician in North Dakota.

Practice sites shall include but are not limited to; Institutional, Managed Care, Retail, or consulting pharmacy in the year selected.

Nominee should demonstrate an outstanding work experience in the Profession of Pharmacy. Participation in national technician association, professional programs, state association activities, and or community services is not required but would be good examples of dedication to the profession.

Nominations will be accepted from any member of the NAPT, NDPhA or NDSHP

2008 Beena George Bismarck

2009 Kerri Ring Minot

DIAMOND AWARD:

Minimum Selection Criteria:

Current or past registration as a N.D. pharmacy technician is required.

The nominee must be living, awards are not posthumously.

The nominee is not a past recipient of this award.

The nominee is not currently serving as an officer of the NAPT Association.

The recipient has demonstrated an outstanding record of community service such as; involved in church, community (scouts, school, PTA, Jaycees or other organizations). The recipient also demonstrates an outstanding service to the Profession of Pharmacy.

Nominations will be accepted from any member of NAPT, NDPhA or NDSHP

2008 Barbara Lacher Fargo

2009 Katherine Kochevar Manvel

FRIEND OF THE NAPT:

Minimum Selection Criteria:

The nominee has not been a previous recipient of this award.

The nominee has been an advocate of NAPT and the Profession of Pharmacy Technicians.

The nominee may include but are not limited to; Registered Pharmacy Technician, Registered Pharmacist, or any related Pharmacy Business. The recipient is not limited to a specific person; a company can also be noted as a recipient.

Nominations will be accepted from any ND Registered Pharmacy Technicians

2008 Dr. William Grosz Wahpeton

2009 Al Schwindt Dickinson

PHARMACY TECHNICIAN OF THE YEAR AWARD:

Minimum Selection Criteria:

The nominee shall be a Registered Pharmacy Technician in North Dakota.

No nominee shall be a member of the Selection Committee or past recipient of the award.

Each nominee shall be actively practicing as a Pharmacy Technician in North Dakota. However, need not be actively involved with NAPT.

Nominations will be accepted from any member of NAPT, NDPhA or NDSHP

1996 Kathy Kochevar Manvel

1997 Robin Nelson Mandan

1998 Barbara Lacher Horace

1999 Kim Durben Fargo

2000 Becky Prodzinski West Fargo

2001 Diane Halvorson Fargo

2002 Jeanette Bleecker West Fargo

2003 Sarah Meyer Fargo

2004 Denise Arends Devils Lake

2005 Brittany Coughlin Fargo

2006 Marisa Dolbeare Minot

2007 Shayla Maier Center

2008 Danika Braaten Reynolds

2009 Lana Bernhardt Lincoln

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BE PREPARED...

Medicaid Integrity Contractor (MIC) Audits

Many of you know, Medicaid Integrity audits have begun in ND. MIC audits are expected to recover more in “overpayments” than the CMS RAC program for Medicare. Health Management Systems (HMS) has been awarded the contracts to conduct the audits. The MIC audit process is not the exact same as the RAC audits. Unlike the Medicare RAC auditors, MIC auditors are not bound by limits on the number of claims records they can request. The appeals process is managed by the State and varies from state to state. Also, the MIC auditors do not have restrictions on how far they can look back to identify overpayments. Generally, the Medicaid Integrity program expects to follow state policy, in regards to “look back periods.” In ND the look back period is 6 years.

MIC’s have the ability to request copies of records, often via letter. They also have the ability to request interviews of staff members. In ND, providers will generally have up to 30 days before the start of an audit to provide initial documents to the MIC auditors. After completion of an audit, the MIC is expected to prepare a draft audit report. The report will be shared with the state Medicaid agency for review and comment. Once the draft report has been reviewed by the state, providers will have 30 days to comment and submit additional supporting documentation. The MIC will then compile a final report to be shared with the state Medicaid agency one last time before sending the final report to providers. Unlike other forms of CMS audits, the State not the auditor will pursue the collection of any overpayments in accordance with State law.

A recent GAO report indicated that 90 percent of all Medicaid payment errors were related to insufficient documentation. As you can imagine, proper documentation will be a high priority for MIC auditors. Other sources of payment errors identified were pricing errors and payment of non-covered services.

Overview of the Appeal Process:

A ND provider has the rights to an appeal process. Provider’s can find their appeal rights in the ND Century Code under § 50-24. 1-24, which states, a provider may request a review of denial of payment for services. A provider must submit a written request within 30 days of the department’s denial claim. Providers must include a statement of the disputed items, and basis for the dispute. Within 30 days of its review request, the provider must provide all documentation, including exhibits and supporting written arguments, along with a calculation (dollar amount) that reflects the provider’s claim as to the correct calculation for each disputed item. The department’s final decision is due within 75 days of receipt of the notice of request for review. The department must adhere to the requirements set forth in the Administrative Practices Act, N.D.C.C. chapter 28-32.

Below are some questions and answers, provided by the ND Medical Services Division regarding the MIC audits. Please read and be prepared! Let our office know if you have any additional questions or if we can be of any assistance. Thank you. Mike

MIC Questions and Answers

When does the appeals process start? Does it start after the Final Report?

Once the MIC has issued the Final Audit Report (FAR), providers have the right to appeal. Providers are encouraged to scrutinize the Draft Audit Report (DAR) and provide any supporting information that could potentially reverse unfavorable findings at that time.

If we want to appeal, do we follow the normal Medicaid appeals process?

Yes.

Are there any facilities that are already under audit?

No.

How are they planning to reconcile both the electronic and the paper filing systems?

Technically, everything is electronic because paper claims are scanned once they are received at DHS. We assume HMS is prepared for any discrepancies that may arise out of the difference between actual electronic files and the scanned ones.

If there are underpayments discovered during an audit, will those be corrected and processed as well?

I have advised the Audit MIC to bring any Medicaid underpayments to my attention so we can correct that with the applicable facility.

Where does HIPAA come to play in all of this? Do the auditors have to comply as well?

Only the information needed to validate a claim should be submitted. We are making it very clear that the auditors are to comply with HIPAA standards throughout the process.

(Continued on page 18)

(Continued from page 17)

What if North Dakota Healthcare Review (NDHR) “prior authorized” a claim that is showing up as an error?

In the event that the service should not have been paid, we won't hold the facility accountable for an item that NDHR approved. However, if the error is not based on the information that NDHR provided (e.g. an incorrect code was used, etc.) then the facility is held accountable.

Do MICs have certain targeted 'hot topics' like RACs do?

No.

Does HMS have a website to look at for educational purposes?

Health Management Systems (Audit MIC) does not have anything on their website specific to MIC audits.

Can we send in the Medical info by CD?

Yes, this is a perfectly acceptable option.

How will a facility be notified is they are selected for an audit?

Health Management Systems will send letters to any facility that they are auditing to notify them of the upcoming audit.

What are the qualifications of the auditors?

Centers for Medicare and Medicaid Services (CMS) selected all of the Medicaid Integrity Contractors. ND Medicaid was not involved in that process. www.hms.com is the website for our Audit MIC. Their site has some information regarding who their employees are.

What if the facility disagrees with the auditors?

They need to voice their concerns in their reply to the Draft Audit Report.

Will the Audit MIC be applying ND Medicaid policies?

Yes.

Can a claim that the RAC audited, be audited by the MIC?

Yes.

If Medicaid is not the primary payer and the claim resulted in a non-payment from Medicaid, will it be selected for an audit?

Probably not. The MICs are more concerned with finding over payments.

Algorithms that DHS has received to date:

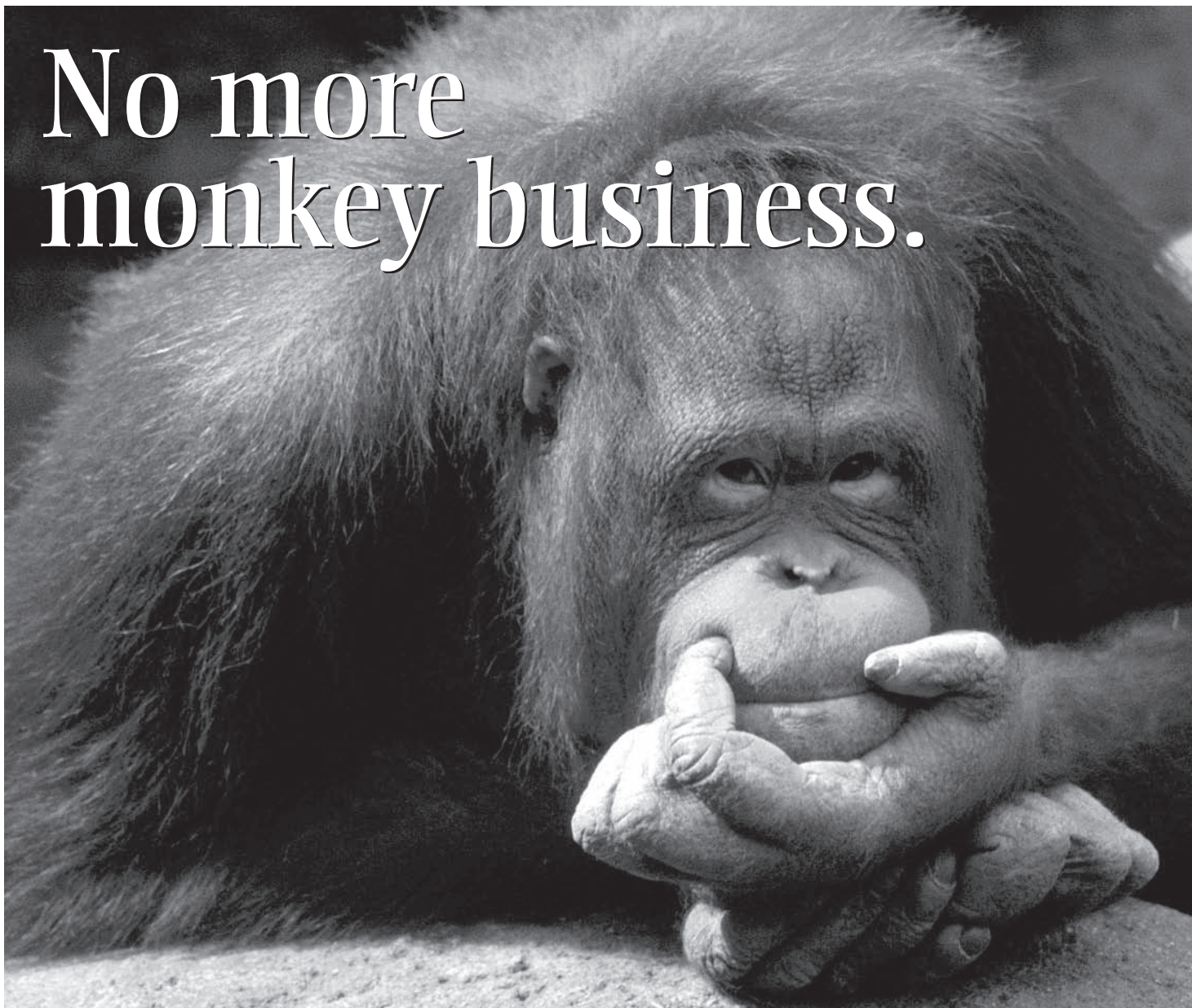
Providers paid for a comprehensive code should not also bill for any related 'unbundled' component or secondary codes as defined by the NCCI

Pharmacy-kit billing errors

Identifies claims with common Zithromax @registered billing errors

Outpatient claim during an inpatient stay

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Bonnie J. Thom, R.Ph.
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William J. Grosz, Sc.D., R.Ph.
Wahpeton, Treasurer

February 26, 2010

Mr. John Walstad
Code Reviser
ND Legislative Council
600 E Blvd – Capitol Bldg
Bismarck ND 58505-0360

Dear Mr. Walstad:

Enclosed please find a copy of the New Article to NDAC Title 61 – Article 61-13 Controlled Substances, along with a copy of the written and a summary of the oral comments received on the rule at the Board of Pharmacy meeting held last night. Also enclosed is the notice of hearing for the rule.

The Board of Pharmacy "may add substances to... substances enumerated in the schedule[] in section[] 19-03.1-05... [relating to Schedule 1 substances]." NDCC 19-03.1-02(1). The proposed interim final rule is issued under that authority.

Also enclosed is a copy of the letter from ND Governor John Hoeven authorizing the emergency rule making for these rules.

The North Dakota State Board of Pharmacy adopted these rules at a special meeting held pursuant to notice on February 25th, 2010 at 9:04 PM. The Board of Pharmacy adopted these rules as an interim final rule. Please publish these rules in the North Dakota Administrative Code with the earliest possible effective date.

Sincerely,

A handwritten signature in black ink, appearing to read "Howard C. Anderson, Jr.", written over a horizontal line.

Howard C. Anderson, Jr, R.Ph.
Executive Director

HCA/eh

Enclosure(s)

Title 61
STATE BOARD OF PHARMACY

SECTION 1. There is hereby created a new Article 61-13 of title 61 of the North Dakota Administrative Rules as follows:

Article 61-13
CONTROLLED SUBSTANCES

Chapter
61-13-01 Controlled Substances Schedules

Section
61-13-01-01 Purpose and Scope
61-13-01-02 Definitions
61-13-01-03 Scheduling

61-13-01-01 Purpose and Scope

The purpose of this rule is to schedule substances which have an actual or relative potential for abuse; and which bear risk to the public health by unknown individuals using them by inhaling the smoke, vapors or by ingesting or injecting the substances.

History: Effective February 25, 2010

General Authority: NDCC 19-03.1-02; NDCC 19-03.1-05

Law Implemented: NDCC 19-03.1-02

61-13-01-02 Definitions.

The definitions under this rule have the meaning as set forth in Chapter 19-03.1 and Chapter 43-15.

History: Effective February 25, 2010

General Authority: NDCC 19-03.1-02; NDCC 19-03.1-05

Law Implemented: NDCC 19-03.1-02

61-13-01-03 Scheduling.

1. The following substances are hereby placed in Schedule I of the Controlled Substances Act NDCC 19-03.1-05 Schedule I subsection 5 Hallucinogenic substances:
 - a. CP 47,497 and homologues 2-[(1R,3S)-3-hydroxycyclohexyl]-5-(2-methyloctan-2-yl)phenol)

- b. HU-210[(6aR,10aR)-9-(hydroxymethyl)-6,6-dimethyl-3-(2-methyloctan-2-yl)-6a,7,10,10a-tetrahydrobenzo[c] chromen-1-ol)].
 - c. HU-211 (dexanabinol, (6aS,10aS)-9-(hydroxymethyl)-6,6-dimethyl-3-(2-methyloctan-2-yl)-6a,7,10,10a-tetrahydrobenzo[c]chromen-1-ol)
 - d. JWH-018 1-Pentyl-3-(1-naphthoyl)indole
 - e. JWH-073 1-Butyl-3-(1-naphthoyl)indole.
2. The following substances are hereby placed in Schedule I of the Controlled Substances Act NDCC 19-03.1-05 Schedule I subsection 7 Stimulant substances:
- a. Mephedrone (2-methylamino-1-*p*-tolylpropan-1-one).[3] also known as 4-methylmethcathinone (4-MMC), 4-methylephedrone.
 - b. 3,4-Methylenedioxypyrovalerone (MDPV)

History: Effective February 25, 2010

General Authority: NDCC 19-03.1-02; NDCC 19-03.1-05

Law Implemented: NDCC 19-03.1-02

I am Gayle Ziegler President of the Board of Pharmacy and I will be acting as officer for this public meeting.

It is now 9:04 PM on Thursday February 25, 2010 on a conference call or in the conference room of the Board of Pharmacy Office at 1906 East Broadway in Bismarck, North Dakota.

This public meeting has been called for the purpose of allowing all interested individuals an opportunity to submit information concerning:

Consideration of an emergency rule that creates a new section 61-13-01-03 of the North Dakota Administrative Code, Article 61-13 "Controlled Substances," that adds addictive, dangerous, and hallucinogenic substances to the Controlled Substances Act (N.D.C.C. § 19-03.1-05).

Information gathered at this meeting will be used by the Board of Pharmacy for it's deliberation and final decision.

The Executive Director of the Board of Pharmacy is taking minutes of this meeting, and this meeting is being recorded, so please identify yourself for the record before you speak.

Everyone present will be given an opportunity to speak. If you have a prepared statement, a written copy of your statement is appreciated and will be helpful.

At this point, I open the meeting for comments:

William J. Nickel of Mandan, North Dakota 58554, expressed concerns that his shop sold some of the products which had been referred to in the public press and in which was eluded might contain some of these chemicals. However, the ingredients on the products he sells does not list any of the chemicals indicated in this rule making. The concern of Mr. Nickel's was primarily that it would be difficult for him to ascertain which of his products actually had the listed chemicals in them and that he felt that he was not responsible for the inappropriate use of his products by the people who purchased them. Mr. Nickel asked what the disposition of suspect products might be, if this rule passed tonight.

It was pointed out that once the rule was published by the Legislative Council, in it's present form, any products containing any of these ingredients would be illegal and would not be able to be sold or possessed.

Wayne Stenehjem, North Dakota Attorney General spoke, expressing support for the proposed Emergency Rule. General Stenehjem said that his Bureau of Criminal Investigation Agents, the State Crime Lab and other Law Enforcement Departments have found North Dakota citizens using these products in an inappropriate manner and that in several instances it has been reported that significant harm and hospitalizations have occurred as a result of use of products containing some of these substances. He also indicated that he supported the adoption of this rule and that he felt that those selling products, which the State Lab had

identified as containing these dangerous chemicals, either knew or should know, by the high price asked of these products relative to ordinary Incense or Bath Oil Salts, these products were being used inappropriately. General Stenehjem pointed out that the roll of his office and the Board of Pharmacy in supporting and hopefully adopting this rule was for the protection of the public health. Individuals using these products intentionally by inappropriate methods, or by inhaling the smoke or vapors from these products in legitimate fashion, not realizing that they contain dangerous chemicals were a significant risk to the public health. Scheduling these substances and thus making it known that they cannot be added as ingredients to what would otherwise appear to be safe products, will serve to protect the public from these chemicals, whether the individuals using them know they are in the products or if they are using them without knowing that these dangerous chemicals are included in the products.

Cassandra Nickel of Bismarck, ND 58504 pointed out that the selling of these products in their shop, which were purported to contain some of these chemicals, never indicated that these products should be used inappropriately. Most of these products are labeled as Incense or Bath Oil Salts and are labeled not for human consumption.

The State Board of Pharmacy Members offered comments, indicating that they supported their role in the protection of the public health. The scheduling of these substances is necessary to protect those individuals either using them inappropriately or using the products without knowing that these chemicals were contained in the products.

Board Members also pointed out that if legitimate medical uses could be found for these products, they could be moved to appropriate schedule. But, at this time there is no legitimate medical use for these products. They are used primarily in research for medical purposes. This research can continue under the Schedule I placement of these products until such time as legitimate uses are properly researched and the safety and effectiveness of the products documented.

Mike Mullen Assistant Attorney General pointed out that the rule will affect these products much like a food recall would affect a product that was determined to be adulterated by chemicals not listed on the packaging.

Howard Anderson, Jr, R.Ph., Executive Director of the ND State Board of Pharmacy pointed out some grammatical corrections in the Rule version that was sent out as part of the Notice, where two extra letters had been inserted in the chemical name of HU-211 and a couple of parentheses and brackets had been omitted. Also, Charles Peterson, Dean of NDSU College of Pharmacy had submitted a written comment in which he pointed out that he felt that “or injecting” should be added after ingesting to 61-13-01-01 – Purpose and Scope as how one of the ways users might abuse these substances. This suggestion was included in the final draft.

At the suggestion of Mick Mullen the table under 61-13-01-03 Scheduling was revised slightly to group into group 1 and group 2 the products being scheduled and the history, general authority and law implemented between the two groups eliminated.

A final copy with the above documented corrections was distributed at the meeting and was emailed to the Members of the Board of Pharmacy prior to final action.

CLOSING

Thank you all for participating. The Board of Pharmacy will use all of the information gathered at this meeting, in making their decision.

At this point, I will close the discussion on new section 61-13-01-03 of the North Dakota Administrative Code, Article 61-13 "Controlled Substances," that adds addictive, dangerous, and hallucinogenic substances to the Controlled Substances Act (N.D.C.C. § 19-03.1-05).

It was moved by Pharmacist Gary Dewhirst and seconded by Pharmacist Bonnie Thom to adopt this interim final Rule represented by the corrected copy. On a vote by Roll Call: Pharmacist Dewhirst – Aye Pharmacist Haroldson – Aye Pharmacist Thom – Aye Pharmacist Ziegler – Aye Pharmacist Detwiller – was absent from the Meeting The interim final rule was passed and declared adopted.

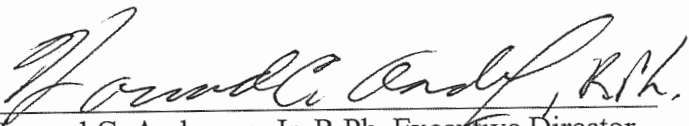
NOTICE OF INTENT TO
ADOPT, AMEND AND REPEAL ADMINISTRATIVE RULES

TAKE NOTICE that the North Dakota Board of Pharmacy will hold a public hearing to address proposed adoption of a New Article to NDAC Title 61 – Article 61-13 Controlled Substances. The hearing will be held at 2:00 p.m. on Saturday, April 24, 2010, Grand International Hotel, 1505 North Broadway, Minot, ND 58703-0777. The purpose of the rule is to schedule substances which have an actual or relative potential for abuse; and which bear risk to the public health by unknown individuals using them by inhaling the smoke, vapors or by ingesting the substance. The proposed rule is not expected to have an impact on the regulated community in excess of \$50,000. No taking of real property is involved in this rulemaking action.

The proposed rule may be reviewed at the office of the North Dakota Board of Pharmacy located at 1906 East Broadway Avenue, Bismarck, ND 58502. A copy of the proposed rule may be requested by writing to the above address, emailing ndboph@btinet.net, or calling 701-328-9535. Written or oral comments on the proposed rule sent to the above address or phone number and received by May 17, 2010 will be fully considered.

If you plan to attend the public hearing and will need specific facilities or assistance relating to a disability, please contact the North Dakota Board of Pharmacy at the above phone number or address at least three days prior to the public hearing.

DATED this 26th day of February 2010.


Howard C. Anderson, Jr, R.Ph, Executive Director
North Dakota Board of Pharmacy



— State of —
North Dakota

Office of the Governor

John Hoeven
Governor

February 25, 2010

Howard C. Anderson, Jr., R.Ph.
Executive Director
North Dakota Board of Pharmacy
P.O. Box 1354
Bismarck, ND 58502-1354

Dear Howard,

On February 25, 2010, I received your request for approval of emergency rulemaking to create a new section 61-13-01-03 of the North Dakota Administrative Code, Article 61-13 "Controlled Substances," which adds addictive, dangerous, and hallucinogenic substances to the Controlled Substances Act (N.D.C.C. § 19-03.1-05).

I have reviewed the request pursuant to N.D.C.C. § 28-32-03(2) and find that emergency rulemaking is necessary to abate an imminent peril that threatens public health and safety.

Sincerely,

A handwritten signature in black ink that reads "John Hoeven". The signature is fluid and cursive, with the first name "John" and last name "Hoeven" clearly distinguishable.

John Hoeven
Governor

38:34:58

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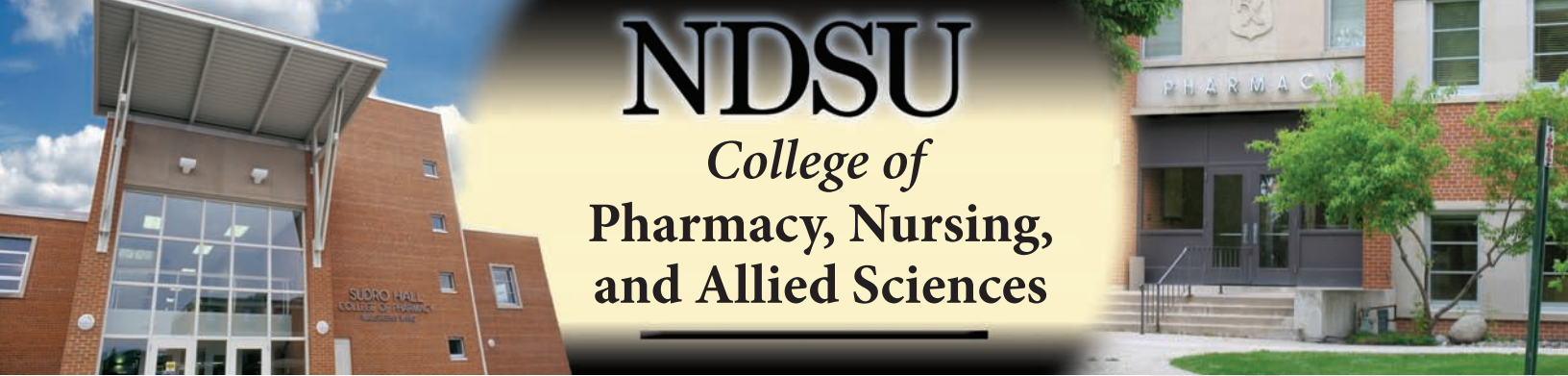
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701.371.3849
lynn.swedberg@mckesson.com

MISC0142-03-07



NDSU

College of Pharmacy, Nursing, and Allied Sciences

A Message from the Dean

On October 14, 2009, Dr. Joseph A. Chapman submitted his letter of resignation to Chancellor William Goetz, effectively stepping down as President of NDSU. In an email to the entire campus, President Chapman gave the following reasons for resigning, "Controversies in recent days have created distractions that have made it impossible for me to provide the leadership this institution deserves. Students have always been paramount, and I fear these distractions have impaired my ability to serve their interests." Dr. Chapman joined NDSU as its 13th President in June 1999, and brought bold leadership to the University which focused on five themes, "It's About People, Students are Paramount, Programs, Leveraging Support, and Stature". His unprecedented achievements over the past 11 years include, record student enrollment growth for 10 consecutive years (from 9,600 to 14,189), graduate doctoral programs increased from 18 to 44, and annual research expenditures increased from \$44 million to \$115.5 million. The campus itself also experienced unprecedented growth during President Chapman's tenure including, the Research and Technology Park, NDSU Downtown Campus, Renaissance Hall, Richard H. Barry Hall, Klai Hall, Bentson Bunker Fieldhouse, Memorial Union, Sudro Hall, the Equine Science Center, Bison Sports Arena, to name just a few. The effective date of President Chapman's resignation is January 2, 2010, however, his last day at NDSU is November 30th.

On October 23, 2009, Dr. Richard A. Hanson was named the Interim President of NDSU by the North Dakota State Board of Higher Education. Dr. Hanson's previous experiences include: President of Waldorf College in Forest City, Iowa, from June 2005 through November 2009; Vice President for Academic Affairs and Dean at Augustana College, from 1995 to 2005; Interim Vice President for Academic Affairs at NDSU, 1995; Associate Vice President for Academic Affairs, at NDSU, from 1992 to 1995; and Department Chair, Home Economics at California State University in Chico. Dr. Hanson is a native of Hillsboro, ND and earned his bachelor's degree in sociology and a master's degree in child development and family relations from NDSU. He earned a doctorate in applied behavioral science from the University of California, Davis. He played football for NDSU, and for the New York Giants in 1971 and 1972. Dr. Hanson will begin his duties as Interim President at NDSU on December 1, 2009.

This is a big change for us and for NDSU. However, we need to remember that President Chapman is a great leader who also happened to lead a great University. This same great University is still here, including all the great people who implemented all the transforming changes that have occurred on campus over the past 11 years. As Dean of the College, I want you to know that we are ly committed to marching forward with the same energy and momentum that has brought us all to this point. So, it is business as usual for us, including striving for even greater heights not previously seen before. We will continue to march on and march forward, something we all would expect from a thundering herd.

I want to personally thank Dr. Chapman (and Gale) for all that he/she has done for us, and for NDSU. Indeed, we have been forever impacted and changed by his great leadership, and our College has reached new levels of excellence in all areas because of his efforts. I also want to welcome Dr. Hanson as our new Interim President of NDSU. We look forward to working with him through this important transition. Go Bison !

North Dakota Rexall Club



ND Rexall Club

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VP David Just
Sec/Tres William Grosz

Board of Directors:

Howard Anderson Jr
Laurie Straus
Charles Peterson
Michael Schwab
James Miller

Fifteen scholarships of \$1,000 each year for four years were awarded to pharmacy students from North Dakota and Western Minnesota who have demonstrated superior academic achievement prior to entering the NDSU Pharmacy Program. The 2009 recipients are: **Jill Anstadt** (P3) Fargo ND; **Lindsay Huether** (P4) Bismarck ND; **Elliot Klapperich** (P4) Mahnomen MN; **Brent Klinkhammer** (P1) Mahnomen MN; **Michelle Larsen** (P3) Watford City ND; **Maari Loy** (P4) Casselton ND; **Brooke Melicher** (P3) Fargo ND; **Katie Montag** (P1) Apple Valley MN; **Rupa Patel** (P1) Dickinson ND; **Suzette Reisenauer** (P3) Dickinson ND; **Faith Wentzel** (P4) Edmore ND; **Megan Adelman** (P3) Bismarck ND; **Matthew Perkins** (P2) Jamestown ND; **Jill Ihry** (P2) Valley City ND; **Megan Born** (P1) Dodge Center MN.

When the Rexall Club was commenced, students (called apprentices) were asked to give \$5 annually. Apprentices were allowed to pay over several months as they only made \$.20 an hour and were happy to have the experience.

Pharmacists were asked to donate anything from \$10 to \$25 annually. Owner Pharmacists were asked for a \$50 annual contribution but many gave \$500 ten times. North Dakota was known for its strong Rexall presence and was in the top per capita of Rexall Pharmacists in the United States.

Since its beginning in the 1960's the Rexall Club has awarded over \$390,000 in scholarships to NDSU College of Pharmacy students.

Currently its assets are \$240,000 and they provide fifteen \$1000 scholarships for a total of \$15,000 yearly. Each recipient receives \$1,000 a year for the four years of their professional education.

This year 80% of the recipients hail from North Dakota.

The ND Rexall Club Board is made up of Rexall Pharmacists along with the Dean of the College of Pharmacy and the EVP of the North Dakota Pharmacists Association. As the number of Rexall Pharmacists declines, this will provide continuity on the Board. The first Sec/Tres of the Rexall Club was Jim Moore, he was succeeded by his son-in-law Jim Churchill. William Grosz assumed the position in 1984.

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