



# Board of Pharmacy

---

## e-News January 2025

---

### Using OARRS Data: One Piece of a Larger Puzzle

The OARRS department has been made aware of situations where patients are being denied care due to questions pertaining to the OARRS report.

When reviewing a patient OARRS report it is important to remember that OARRS is only a single piece of the bigger clinical puzzle. The information found in OARRS is intended to be reviewed to observe for potential patterns of concern and connect prescribers and pharmacies that share in the care of a patient. OARRS reports are never intended to be the sole reason for denying care. Any concerns found within an OARRS report need to be confirmed through conversation with the patient and other prescribers/pharmacies listed within the OARRS report.

#### Fill Date vs. Sold Date

A pharmacy is required to report *either* the date filled or the date sold of a prescription. Currently OARRS does not collect both the filled date and the date sold. Regardless of which is submitted, it will show up as the RX Fill Date on the OARRS report. This means that a prescription may have been filled several days before a patient picked up the medication. If you have questions or concerns about the specifics of when a patient took possession of a prescription, you will need to contact the dispensing pharmacy for the exact details. The Board is working on updates to its OARRS reporting rules to provide additional clarity on date filled vs. date sold and will notify users when such changes are effective.

#### Multiple Patients or Wrong Patient Information

When performing a patient search, the minimum information required is first name, last name, DOB, and zip code. The more information that can be provided, such as address and phone number, the increased likelihood of accurate patient data being pulled into the OARRS report. Using common names and including additional states in the OARRS search increases the chances that multiple patient records are pulled into an OARRS report. Because of this possibility, all Linked Records need to be reviewed to determine if they are for the patient being treated. OARRS does not have the ability to view information provided by other states. Any information that comes into OARRS from another state that was included in your search needs to be vetted by discussing with the patient, prescribers/pharmacies, and potentially the PDMP of that particular state.

As patients commonly receive medications from more than one pharmacy over the course of their lifetime, Prescription Drug Monitoring Programs (PDMPs) such as OARRS use computer programming and algorithms to identify and match dispensing information for an individual patient. To maintain accuracy of the information provided in the OARRS report, it is important that the patient information is properly documented when being entered into the dispensing system. OARRS uses information such as name, DOB, gender, telephone number, and address to match patient information. Entering an incorrect DOB, or a nickname instead of a legal name, can keep the program from fully identifying and compiling all relevant dispenses for a patient, therefore potentially leaving holes in the patient's record. This missing information could result in

a dangerous combination of medications being prescribed/dispensed and potentially lead to patient harm or delay in the time to receive the OARRS report as patients with multiple potential results must be manually reviewed by OARRS staff.

Remember, OARRS is only a tool and is subject to discrepancies in information from multiple sources. It is important to submit accurate and full information when submitting dispensing information to OARRS. Due diligence is required to research any question or discrepancy you may find to avoid withholding care inappropriately.

---

## REMINDER: Continuous Quality Improvement Rules Effective 3/1/2025

On March 1, 2025, the following rules will go into effect:

- Rule [4729:5-3-22](#) of the Administrative Code requires any pharmacy licensed as a terminal distributor of dangerous drugs to implement a continuous quality improvement program for pharmacy services. For more information on the requirements of this rule, visit: [www.pharmacy.ohio.gov/PharmacyCQI](http://www.pharmacy.ohio.gov/PharmacyCQI).
- Rule [4729:5-4-02](#) of the Administrative Code requires pharmacies licensed as terminal distributors of dangerous drugs to submit certain information to the Board. This includes the reporting of some dispensing errors. For more information on the requirements of this rule, visit: [www.pharmacy.ohio.gov/PharmacyReport](http://www.pharmacy.ohio.gov/PharmacyReport).

To coincide with the new rules listed above, the Board is also implementing new duty to report rules for pharmacy personnel effective March 1, 2025:

- Rule [4729:1-4-02](#) of the Administrative Code is a new version of the pharmacist duty to report rule. This rule removes the requirement that pharmacists report errors in dispensing to the Board, as this responsibility will fall under the pharmacy duty to report rule (OAC [4729:5-4-02](#)). For more information on the new version of this rule, visit: [www.pharmacy.ohio.gov/PharmReportNew](http://www.pharmacy.ohio.gov/PharmReportNew).
- Rule [4729:2-4-02](#) of the Administrative Code is a new version of the pharmacy intern duty to report rule. For more information on the new version of this rule, visit: [www.pharmacy.ohio.gov/InternReportNew](http://www.pharmacy.ohio.gov/InternReportNew).
- Rule [4729:3-4-02](#) of the Administrative Code is a new version of the current pharmacy technician duty to report rule. For more information on the new version of this rule, visit: [www.pharmacy.ohio.gov/TechReportNew](http://www.pharmacy.ohio.gov/TechReportNew).

---

## Reminder: OARRS Now Alerts Healthcare Providers About Previous Overdose History

On December 16, 2024, the Ohio Automated Rx Reporting System (OARRS) started to alert healthcare providers about patients who have experienced a non-fatal drug overdose. The non-fatal drug overdose indicator is intended to improve care coordination and promote access to medication for opioid use disorder and other tools to prevent fatal overdoses.

For more information about the indicator, please see the following quick reference guide: [www.pharmacy.ohio.gov/NFOD](http://www.pharmacy.ohio.gov/NFOD).

### Important Reminders:

- A history of non-fatal drug overdose is NOT reflected in the Overdose Risk Score (ORS) listed on a patient's OARRS report.
- The indicator does not provide information on overdoses treated by EMS where the patient refused transport to a hospital or overdoses that were treated in Ohio hospitals prior to April 8, 2024.
- The indicator is visible to prescribers and pharmacists only.

- This information is intended to be used to improve care coordination and ***should not*** be used to terminate a patient relationship.

To assist pharmacists in using this information, the Ohio Board of Pharmacy developed a frequently asked questions document that can be accessed here: [www.pharmacy.ohio.gov/NFpharmacist](http://www.pharmacy.ohio.gov/NFpharmacist)

To assist prescribers in using this information, Ohio's healthcare regulatory boards developed a frequently asked questions document that can be accessed here: [www.pharmacy.ohio.gov/NFprescriber](http://www.pharmacy.ohio.gov/NFprescriber)

Among Ohioans who died in 2022 from an unintentional drug overdose, at least 32% experienced a prior non-fatal overdose. Additionally, 26% of those who suffered a fatal overdose in 2022 received a prescription for a controlled substance from a healthcare provider within 60 days of their death. These interactions with the healthcare system reinforce the need to ensure high-risk patients have access to interventions such as overdose reversal medications (e.g., naloxone) and medication for opioid use disorder.

This new alert system is another example of Governor DeWine's ongoing and comprehensive efforts to prevent overdose deaths and fight drug addiction. Ohio's coordinated efforts are achieving results.

In October, **Governor DeWine announced** that newly verified data by the Ohio Department of Health (ODH) demonstrated that the number of overdose deaths in Ohio have dropped substantially for a second consecutive calendar year.

---

## FDA Issues Declaratory Order Confirming Tirzepatide Shortage Resolution

On December 19, 2024, Food and Drug Administration's (FDA's) Center for Drug Evaluation and Research issued a **declaratory order** confirming its determination that the tirzepatide shortage has been resolved.

The order states that the agency does not intend to take action against compounders for violations of the Food, Drug, and Cosmetic Act (FD&C Act) arising from conditions that depend on the inclusion of tirzepatide injection products on FDA's drug shortage list:

- For a state-licensed pharmacy under Section 503A of the FD&C Act compounding, distributing, or dispensing tirzepatide injections within 60 calendar days from FDA's announcement, until February 18, 2025.
- For outsourcing facilities under Section 503B compounding, distributing, or dispensing tirzepatide injections within 90 calendar days from FDA's announcement, until March 19, 2025.

FDA may still take action regarding violations of any other statutory or regulatory requirements, such as to address findings that a product may be of substandard quality or otherwise unsafe.

---

## Ohio Loan Repayment Program Cycle

The 2025 Ohio Loan Repayment Program Application Cycle is scheduled to open **February 1st, 2025 through February 28th, 2025**. Pharmacists are eligible to apply to this program under the Ohio Health Professionals Loan Repayment Program.

To apply, visit: <https://odh.ohio.gov/know-our-programs/primary-care-office/workforce-programs>.

Any questions regarding applications can be directed to [PCRH@odh.ohio.gov](mailto:PCRH@odh.ohio.gov). Please include the nature of your request and the program for which you are applying.

The Primary Care Office (PCO) works to improve access to comprehensive primary care services and increase health care workforce availability to meet the needs of Ohio's underserved communities. The PCO works to identify shortages of primary care, oral health, and behavioral health services throughout rural and urban Ohio. Types of shortage designations include Health Professional Shortage Areas, Medically Underserved Areas/Populations, and Governor's Certified Shortage Areas for Rural Health Clinics. Identified needs are addressed through the PCO's coordination of federal and state workforce programs, including the National Health Service Corps, state loan repayment, and J-1 visa waivers.

---

## Reminder: Board is Offering Free Fentanyl Test Strips and Naloxone Brochures to All Ohio Licensees

The Ohio Board of Pharmacy continues to offer to all licensees no-cost fentanyl test strips and educational handouts in partnership with the Office of Governor Mike DeWine, RecoveryOhio, the Ohio Department of Mental Health and Addiction Services, and the Ohio Department of Health. Each licensee can request up to two boxes of fentanyl strips per order (100 strips per box), and the Board's educational handouts are also available in English and Spanish (100 handouts per pack). Strips will be available until supplies last and may be reordered by the same location if running low.

Orders for fentanyl test strips and handouts must be placed online using the following link: [www.pharmacy.ohio.gov/FTSorder](http://www.pharmacy.ohio.gov/FTSorder).

In addition to test strips, licensees may request naloxone overdose and recognition [brochures](#) while supplies last. Use the following link to order: [www.pharmacy.ohio.gov/nalbrochure](http://www.pharmacy.ohio.gov/nalbrochure).

**DUE TO GRANT FUNDING RESTRICTIONS, WE ARE ONLY ABLE TO OFFER STRIPS TO LICENSEES LOCATED IN THE STATE OF OHIO.**

---

## Registration is Open for 2025 PDG-FDA Virtual Town Halls on DSCSA Progress

Registration is open for three [town halls](#) hosted by the Partnership for DSCSA Governance (PDG) and FDA on DSCSA implementation efforts. These virtual town halls will provide a forum for trading partners and other interested parties to share information on continued implementation of DSCSA interoperability and areas of remaining concern. Each town hall will take place two months before the [exemption](#) period ends for each group of trading partners:

- [March 26, 2025: Progress toward end of manufacturer exemption](#)
- [June 25, 2025: Progress toward end of wholesale distributor exemption](#)
- [September 24, 2025: Progress toward end of dispenser exemption](#)

Individuals interested in providing comments during the town halls should indicate their request to speak on the registration form at least 10 days in advance of the town hall.

Interested parties are invited to attend any or all town halls. Please register separately for each town hall you would like to attend. To register, visit: <https://dcsagovernance.org/2025-pdg-fda-town-halls/>

---

## Be Vigilant - Watch Out for Scammers!

**BOARD STAFF DO NOT ASK FOR MONEY OVER THE PHONE OR VIA EMAIL TO RESOLVE PENDING INVESTIGATIONS. WHEN IN DOUBT, PLEASE CONTACT THE**

**BOARD IF YOU BELIEVE YOU ARE THE TARGET OF A SCAM.**

The Ohio Board of Pharmacy continues to learn that licensees are being targeted by scammers who claim to work for various governmental agencies (Board of Pharmacy, DEA, FBI, Department of Justice, etc.) to obtain money from the target. The Board strongly encourages licensees to be alert to avoid scammers.

Scammers may try to initiate contact via phone calls, emails, faxes, and letters purporting to originate from various state and federal agencies that include allegations of drug trafficking and threats of suspension against the target's license.

Board of Pharmacy investigators will not ask for fine payment or personal/sensitive information over the phone and will never contact licensees via fax. As a reminder, administrative fines issued by the Board are not paid via gift cards or cryptocurrency. If the Board of Pharmacy is conducting an investigation and that individual faces action against their license, they will receive an official notice of opportunity for a hearing either via certified mail, personal service, or electronic registered mail.

If you are contacted by a scammer, please report this information using the Board's online complaint form: [www.pharmacy.ohio.gov/complaint](http://www.pharmacy.ohio.gov/complaint). Additionally, reports should be made to your local law enforcement agency.

If you receive any suspicious calls or correspondence purporting to be from the Board of Pharmacy, we encourage you to call (614-466-4143) or email ([contact@pharmacy.ohio.gov](mailto:contact@pharmacy.ohio.gov)) the Board to confirm its legitimacy.



***People call, text, and chat the 988 Lifeline to talk about a lot of emotional needs—not just thoughts of suicide. Whatever your reason, the #988Lifeline is there to help. There is hope.***

---

Ohio Board of Pharmacy  
**Mike DeWine**, Governor | **Steven W. Schierholt**, Executive Director

Ohio Board of Pharmacy | 77 S. High St 17th Floor | Columbus, OH 43215 US

[Unsubscribe](#) | [Constant Contact Data Notice](#)