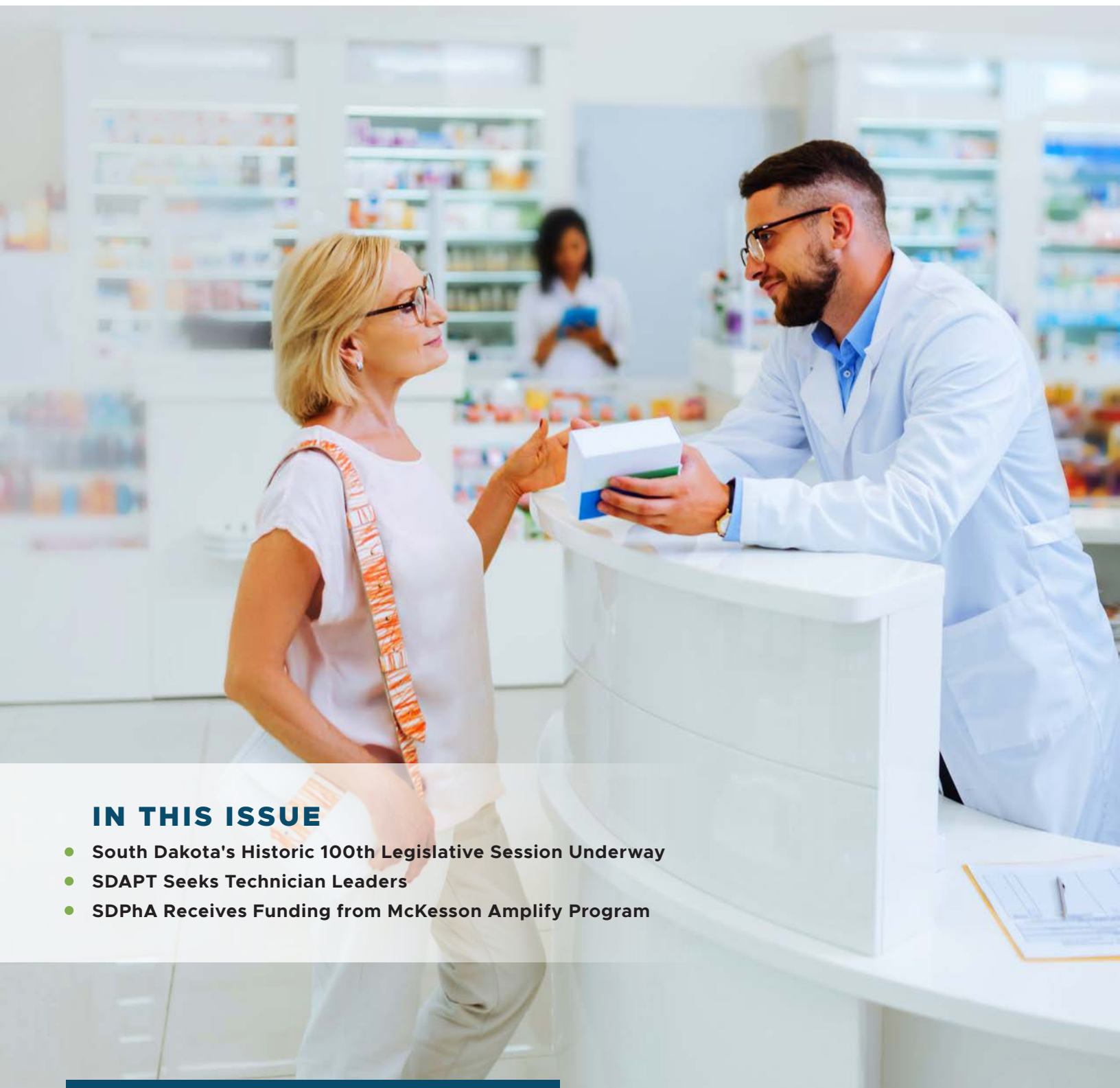


S O U T H D A K O T A P H A R M A C I S T



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- South Dakota's Historic 100th Legislative Session Underway
- SDAPT Seeks Technician Leaders
- SDPhA Receives Funding from McKesson Amplify Program

Our mission is to promote, serve and protect the pharmacy profession.

South Dakota Pharmacists Association

320 East Capitol, Pierre, SD 57501
605-224-2338 // 605-224-1280 fax
www.sdpha.org

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Jessica Strobl

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amanda@sdpha.org

South Dakota Board of Pharmacy

4001 West Valhalla Boulevard, Suite 106
Sioux Falls, SD 57106
605-362-2737 // www.pharmacy.sd.gov

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JANUARY

- 1 New Year's Day
- 12 National Pharmacists Day
- 14 100th South Dakota Legislative Session Opens
State of the State Address
South Dakota State Capitol, Pierre, SD
- 17 South Dakota Board of Pharmacy Meeting
Sioux Falls, SD | 9 am – 1 pm
- 20 Martin Luther King Jr. Day

FEBRUARY

- 11 SDPhA Legislative Days:
Dinner & Legislative Update
Missouri Events Center [\(RSVP Here\)](#), Pierre, SD | 6 pm
- 12 SDPhA Legislative Days: Wellness Screenings
South Dakota State Capitol, Pierre, SD | 7–10 am
Wellness Screenings Courtesy of SDSU Student Pharmacists
- 17 President's Day

MARCH

- 21–24 APhA Annual Meeting and Exposition
Nashville, TN
- 31 100th Annual Legislative Session
Reserved for the consideration of gubernatorial vetoes

APRIL

- 4 South Dakota Board of Pharmacy Meeting
Sioux Falls, SD | 9 am – 1 pm
- 5–6 South Dakota Society of Health System Pharmacists 47th Annual Meeting
Holiday Inn City Centre, Sioux Falls, SD

The South Dakota Pharmacist is published quarterly: January, April, July, and October. Opinions expressed do not necessarily reflect the official positions or views of the South Dakota Pharmacists Association.

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If you are not on our mass e-mail system check our website periodically for district meetings and other upcoming events. They will always be posted at: www.sdpha.org.



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Director's COMMENTS

Amanda Bacon // SDPhA Executive Director



100th Legislative Session Underway

SDPhA has been diligently preparing for the 100th legislative session which kicked off Jan. 14, 2025. It is set to be a history-making year at the Capitol for many reasons, not the least of which is the number of years that body has convened. A program celebrating a century of the South Dakota Legislature is

planned for April 12, 2025. Meantime, while Gov. Kristi Noem is set to give the State of the State address to open legislative session Jan. 14, on Jan. 15, she is scheduled to appear on Capitol Hill. That's for a hearing that will mark the beginning of the process which is expected to lead to her confirmation as Secretary of Homeland Security for the incoming Trump administration. If confirmed, Noem will step down from her role as South Dakota's Governor, and current Lt. Governor, Larry Rhoden will be sworn in to serve as Governor for the remainder of Noem's term. Never in our state's history has the state's leader changed during the legislative session. Also, we have never had this many female legislators - 39 women will serve in Pierre this year – eight more than last year.

This year will have the largest class of freshman senators in 35 years, and the total number of new lawmakers this term impresses as well, at 42. That is a lot of new people to meet and educate about the many complex issues facing pharmacy today. SDPhA's Commercial and Legislative Branch was one of several hosts for a reception for new legislators in December of 2024. Lindsey Riter-Rapp, SDPhA lobbyist and general legal counsel joined me at the event where they were able to meet most of those new lawmakers – a valuable opportunity to make an acquaintance before the heavy lifting of Session begins.

At the time of this writing, we do not anticipate bringing any legislation, but we do anticipate a highly active session. Bills began to drop shortly after the New Year, and we are already monitoring several bills of consequence. Many relate to proposed program and budget cuts that may impact pharmacy and patients, as well as the state's universities. You can find the list of bills we are already monitoring on the [SDPhA Website Action Center](#).

HB 1016 - An act to revise provisions related to pharmacy

Chief among the bills with which we are already engaged is [HB 1016, An act to revise provisions related to pharmacy](#). This legislation, filed at the request of the Board of Pharmacy, will be of particular consequence to the profession, and to the Association as a whole. The bill moves to increase license fees on wholesalers and cleans up a lot of language in the code. In addition, Sections 35 and 36 repeal the South Dakota Pharmacists Association from statute. Please watch for more communication on this particularly important bill.

2025 Legislative Days February 11-12

There is no time like the present to get involved! Join us February 11 and 12 for the 2025 Legislative Days event in Pierre. This event offers a unique opportunity for pharmacists, pharmacy technicians, and pharmacy students to engage with the legislative process and highlight the vital work they do.

We always have a strong contingent of SDSU Pharmacy students here for this event. We NEED our pharmacists to join us, too!

We know it's hard to get away during the week, but especially for those who live in Pierre, and nearby, we encourage you to make it a priority to attend. Your participation not only enhances the learning experience for students but also underscores the importance of having a strong presence during the legislative session. Your involvement is crucial in demonstrating the significance of our profession to lawmakers.

Tuesday evening, we will host a FREE meal, and townhall-style session where attendees can learn about our progress in the current legislative session. Lindsey Riter-Rapp, SDPhA lobbyist, and I, will provide insights into the legislative process in South Dakota and discuss the various bills and legislation the SDPhA Commercial and Legislative Branch is working on your behalf.

Wednesday morning will feature wellness screenings at the Capitol, conducted by SDSU student pharmacists. This is an excellent opportunity for students to practice their skills and for attendees to benefit from these health services. We expect twenty-four students at this year's event!

Legislative Days is a fantastic opportunity to highlight the diverse and impactful work that pharmacists perform daily. It also offers students a chance to hone their skills through hands-on experience, attend committee meetings, and interact with lawmakers on the House and Senate floors. There is no better way to learn about the legislative process than by experiencing it firsthand!

Please [RSVP by sending me an email](#) if you'd like to attend!

Have you Filed a PBM Complaint?

With HB 1135 (2023) now the law in South Dakota, our focus has been assessing how it works in practical application for regulating Pharmacy Benefit Managers (PBMs). We would love to hear about your experiences with the process, and anything else you are willing and able to share.

We find there are still some who are unaware of the regulations, and the processes for filing a complaint. SDPhA is planning some educational opportunities on these topics, and we encourage you to keep an eye out for emails, posts, etc. with more details.

One especially important note – it is incumbent upon us to report issues as they occur and provide the proper documentation.

Complaints need to be reported IN WRITING via the form. A phone call to the DOI is not going to initiate the process. The Division has also hired an investigator and a pharmacist, but the process is still a bit novel for everyone. We are committed to taking the time to work through any issues that arise with the process as we go. You can find a link to the complaint form, and a host of other resources on our new webpage devoted exclusively to [PBM & Payer Resources](#). You can get a sneak peek on page 7.

PBM Reform on Capitol Hill

While we are pleased with the strides we have made here at home in recent years on PBM reform, we continue to engage at the national level as well. It is here where we need to see Congress make changes in Medicare and a host of other regulations impacting PBMs. There are very few issues for which you will find bipartisan support on Capitol Hill, but reining in PBMs has been one of them. Even so – the PBM reform bills we have fought for so hard met their end when they were cut out of the year-end package last Congress when a bipartisan bill crumbled. The bill that finally passed had the support of President-elect Trump, but did not include the PBM package.

Failure to finish the job on these reforms was a huge win for PBMs, and huge loss for South Dakota patients and pharmacies. It was not for lack of effort on your part – when we put out the call, you answered! More than two hundred of you sent emails from the Action Center in less than 36 hours!

We have spent most of our time engaging the office of Sen. John Thune R-SD, on this issue. Sen. Thune has played a particularly significant role as a member of the Senate Finance Committee. Now, as majority leader in the Senate, we urge Sen. Thune to make the PBM reforms from the last Congress a priority in this Congress. We join the chorus of pharmacy groups urging this reform as a stand-alone

Director's COMMENTS

continued...

bill that will not get buried under yet another mountain of spending bills. We cannot overstate how much we appreciate Sen. Thune's leadership on this issue and his strong show of support for South Dakota pharmacy. We encourage a resounding thank you for all the hard work he's put in on this issue when you reach out to him through our [Action Center](#).

Office News and Notes

"Winter is a time of withdrawing from the world, maximizing scant resources, carrying out acts of brutal efficiency and vanishing from sight; but that's where the transformation occurs." That quote is from a book I am currently reading, and between the frigid temperatures, and SDPhA's current situation - I felt every word of it in my very bones.

I feel a little (or maybe a lot) like I'm hibernating the past few months. Much of our work at SDPhA in this season of "wintering" has not been as forward facing as usual. It just can't be - I'm one person, and we are deep in the trenches of transformation. That has involved a lot of reflection, research, pushing the pencil, erasing, calculating, and then calculating over again. Throwing about everything at the wall to see what sticks. The reality is, whether SDPhA remains in statute after this legislative session, or is repealed from it, the Association will have to change if it is going to survive.

We continue to work diligently on what paths forward are available to us. Since the association, its members, and our work is currently outlined in statute, we continue to take great care to ensure we are moving forward in an appropriate manner. Our legal team has identified ways we can do so. We talked a lot about some of those options at the convention business meetings and Fall district meetings and got some great feedback.

Our future will likely involve a mix of associate memberships and corporate sponsors, and potentially pharmacist memberships (independent of the current structure), and even possibly technician memberships. The details

of all of that are very much a work in progress - thus pushing the pencil, erasing, calculating, and recalculating. So much depends on what happens this legislative session.

Change is hard. Change is messy. We are going to get a lot of things right. We are also going to get some things wrong. That is just the truth of how things go when things start to happen differently. We hope you will celebrate with us when we get it right and extend grace for the things that may fall a little short.

I am grateful for those of you who call and email with ideas, suggestions, and encouragement. I have received some of the kindest cards in the mail in the past few months. If you stop in, you will see them sitting around the office. Your words of gratitude for the association and the work we're undertaking right now keeps me going. I am also grateful for those who understand that yes, we have other initiatives we would like to see move forward, just as you do. But you also understand the need for us to be able to launch those things from a firm foundation. I am also grateful for the ongoing and transparent communication between SDPhA, the SD BOP board members and Executive Director Tyler Laetsch. I look forward to continuing our collaborative approach well into the future.

Finally, you will start to hear from us on a more consistent basis from here out. During session, we provide weekly updates. After session, we will launch a new eNewsletter. If you aren't getting our updates - [please email me](#). I will make sure you are on the list. We are also finally planning to launch an option to receive text alerts from us. We get this request often. You will have to opt-in for this, so look for more information on that in those weekly emails.

Respectfully,

AMANDA BACON

PBM AND PAYER RESOURCES

[Home](#) / [Resources](#) / PBM and Payer Resources

PBM RESOURCES

[PBM Enforcement](#)

[PBM Complaint Form](#)

ADDITIONAL PAYER RESOURCES

[South Dakota Medicaid](#)

[Medicaid Provider Enrollment](#)

PBM REFORM IN SOUTH DAKOTA

South Dakota Pharmacists Association advocates for meaningful pharmacy benefit manager (PBM) reform that benefits patients and pharmacies together. SDPhA supports efforts in PBM oversight on the federal and state level. We work closely with our South Dakota Congressional Delegation, the South Dakota Legislature, the South Dakota Division of Insurance and other stakeholders to ensure adequate payment and meaningful reform.

References to current SD law for PBMs are linked on right. Should you know of any PBM in violation of this code, we encourage you to file a complaint (link left and below) with the South Dakota Division of Insurance to help enforce law for which we advocated.

TIPS FOR FILING COMPLAINTS:

- A phone call doesn't do it. You must fill out the complaint form.
- Include a clear and concise description of the non-compliance (i.e., state law prohibits clawbacks and PBMs continue to clawback funds after the point of sale).
- Cite the specific state statute (list on the right).
- Include records/claim/other evidence of the PBMs' violations.
- Include all other information required by the state's complaint form.
- Quantity is important, but quality is too - please make sure you have all the necessary documentation for each complaint.

[PBM Complaint Form](#)

SOUTH DAKOTA PBM REGULATIONS

PBM licensure/registration requirement

[S.D. Laws 58-29E-2](#)

Prohibition against retroactive claim adjustments

[S.D. Laws 58-29E-13](#)

Prohibition against adjudication fees

[S.D. Laws 58-29E-16](#)

Fair pharmacy audit procedures

[S.D. Laws 58-29F](#)

Prohibition against anti-mandatory mail-order

[S.D. Laws 58-18-37](#)

Any Willing Pharmacy

[S.D. Laws 58-18-37](#)

Not less reimbursement than PBM-owned pharmacies

[S.D. Laws 58-29E-19](#)

President's PERSPECTIVE

Andy Tonneson // SDPhA Board President



Let the craziness begin! With all the school activities, coaching youth basketball, wrestling meets, work, and family gatherings, it is often hard to find time for much else. Even finding the time to sit down and write this letter has been daunting. With everything going on this time of year, I am reminded of the need for community. It can be difficult

getting the kids to all their activities, so we often rely on friends, family, and acquaintances to get everyone where they need to be. At times, it can certainly be overwhelming!

It takes a village to raise a child, and I firmly believe in that. I am thankful this time of year for the community I have around me. Pharmacy is much the same, it takes a village to protect our profession. There are few things, if any, that any one of us can do solely on our own. This year will be no different.

With the 2025 Legislative Session set to begin on January 14, 2025, SDPhA and our lobbyists will be there with a seat at the table, ready to protect our profession against the litany of bills that will be proposed. We have that seat because of the generous contributions to our C&L fund. Without those contributions, decisions would be made without our association's input and that could be disastrous for our profession.

There are several ways that SDPhA members can have their voices heard. One of the ways that we can reach out to legislators to voice our support or concerns is through the Action Center on the SDPhA website. A clear example

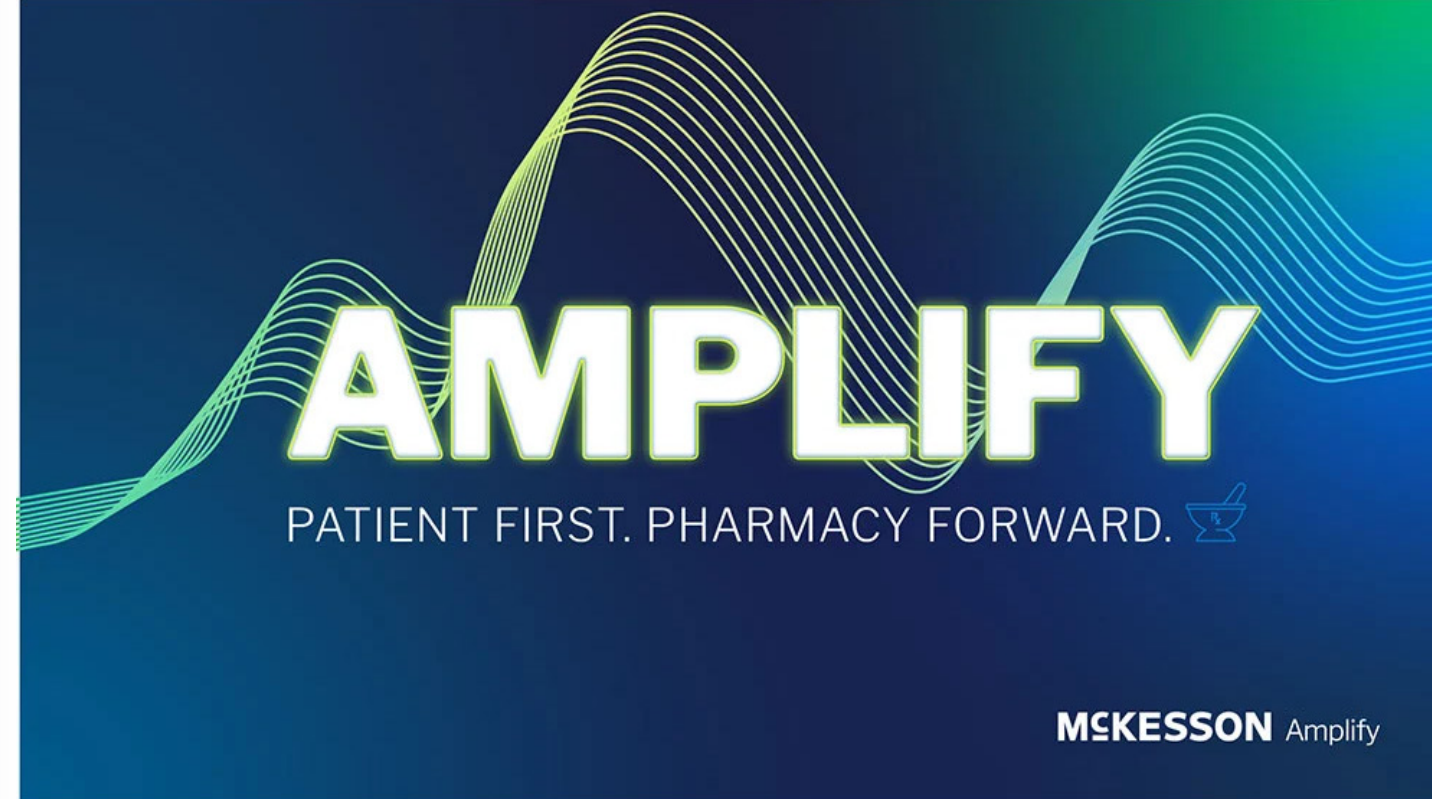
of this would be in December when a "Call to Action" came out regarding the bipartisan PBM reforms at the national level. Our members came out in droves to send messages to their representatives, and I cannot thank each of you enough for responding to that call! Though the result was not what we would like it to be, our voices were heard loud and clear. You can also use the Action Center to follow the bills the association is monitoring.

Another unique way that we can reach out to our state legislators is by attending Legislative Days at the State Capitol in Pierre. This is a wonderful way to get to speak directly to your local legislators in person and share your personal stories of life as a pharmacist in the state of South Dakota. Legislative Days are February 11-12th this year and all are welcome to attend! The evening of the 11th we have dinner and our Legislative Update at the Missouri Avenue Event Center in Pierre. This will be our second year in this venue and what a great spot to have this gathering! The following morning, join the SDPhA Board members and our amazing SDSU College of Pharmacy students as they perform wellness screenings at the capital. While there, you will have the opportunity to go out on the floor and talk to members of the legislature.

Even during this crazy time of year, it only takes a few moments to make a significant impact and have your voices heard. I encourage you all to get involved in this legislative session. Keep in mind the need for community. When we all band together for a just cause, there is no telling what we can accomplish.

Respectfully,

ANDY TONNESON



McKESSON Amplify

South Dakota Pharmacists Association Receives Funding from McKesson Amplify Program

We are thrilled to announce that SDPhA has been selected to receive funding through the McKesson Amplify program. This generous support from McKesson will significantly enhance our ability to advocate for the pharmacy profession and improve patient care across our community.

The McKesson Amplify program is designed to support state pharmacy associations in their efforts to advance the pharmacy profession and create pathways for real, lasting change for independent pharmacies. With this funding, we are able to expand our advocacy efforts, host quality events, and support initiatives that drive positive change in the pharmacy sector.

Some of the key areas that we will focus on this year include:

- Advocacy
- Enhanced Communications for Members
- Advocacy Education and Events

This support underscores our shared commitment to elevating the pharmacy profession and ensuring sustainability for the future. We are confident that this funding will help us achieve our mission of delivering exceptional care to our patients and our communities.

We extend our heartfelt thanks to McKesson for their commitment to independent pharmacies and their generous support through the McKesson Amplify program. Together, we can make a lasting impact on the pharmacy profession and the communities we serve.

Stay tuned for more updates on how this funding is making a difference in our advocacy efforts and initiatives.

McKESSON
Amplify

2024/2025 COMMERCIAL & LEGISLATIVE DISTRICT DUES CONTRIBUTIONS

FIRST NAME _____ LAST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ MOBILE PHONE _____

EMPLOYER / COMPANY _____

WORK ADDRESS _____

WORK CITY _____ STATE _____ ZIP CODE _____

WORK PHONE _____ WORK FAX _____

EMAIL ADDRESS _____

Do you wish to receive SDPhA email alerts regarding important pharmacy issues? YES NO

COMMERCIAL & LEGISLATIVE FUND Memberships set by SDPhA C & L Executive Committee, 2007

PHARMACY OR BUSINESS MEMBERSHIP \$500.00 Includes One Individual Membership

NAME OF PHARMACY / BUSINESS _____

NAME OF INDIVIDUAL INCLUDED _____

CORPORATE MEMBERSHIP \$1,000.00 Two or more stores of the same corporation

NAME OF CORPORATION _____

NAME OF INDIVIDUAL INCLUDED _____

INDIVIDUAL MEMBERSHIP

\$100 LEVEL \$200 LEVEL OTHER \$ _____

DISTRICT DUES Circle your District

ABERDEEN – \$20.00 BLACK HILLS – \$20.00 HURON – \$10.00 MITCHELL – \$10.00 MOBRIDGE – \$10.00
ROSEBUD – \$10.00 SIOUX FALLS – \$20.00 WATERTOWN – \$20.00 YANKTON – \$15.00

TOTAL ENCLOSED \$ _____

MAIL TO: SD PHARMACISTS ASSOCIATION, BOX 518, PIERRE, SD 57501-0518 / FAX: 605-224-1280



2025 Legislative Days



February 11-12, 2025

Legislative Update and Dinner

February 11 | 6pm | Missouri Avenue Event Center

Health Screenings

February 12 | Beginning at 7 am

by SDSU College of Pharmacy Students at the Capitol Building

What does SDPhA do for you?

- SDPhA provides you with legislative and regulatory representation on the state and national level;
- Protects and supports pharmacists in every practice setting;
- Liaison with national pharmacy organizations and state healthcare professional associations/societies;
- Provides media relations support and patient education opportunities for pharmacists;
- Liaison with SDSU's College of Pharmacy faculty and students;
- Provides pharmacists with critical information in a timely manner through the *SD Pharmacists* journal, email, and social media.

EST. 1886
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PHARMACISTS
ASSOCIATION
PO BOX 518 PIERRE, SD 57501
(605) 224-2338
WWW.SDPHA.ORG
SDPHA@SDPHA.ORG

100th SOUTH DAKOTA LEGISLATIVE SESSION CALENDAR

2025 ♦ 38 Legislative Days



Please refer to the Joint Rules, Chapter 17 for complete information.

| | Sun | Monday | Tuesday | Wednesday | Thursday | Friday | Sat |
|---------------|--|--|--|---|--|--------|-----|
| January 2025 | 5 | 6 | 7 | 1 | 2 | 3 | 4 |
| | 12 | 13 | 14 | 8 | 9 | 10 | 11 |
| | | | Session Opens 12 Noon(CST) State of the State LD 1 | 15 | 16 | 17 | 18 |
| | | | | State of the Judiciary 10:00am State of the Tribes 1:00pm LD 2 | | | |
| | 19 | 20 | 21 | 22 | 23 | 24 | 25 |
| | Martin Luther King Jr. Day | Executive orders filed (Constitution, Art. IV, Sec. 8) LD 5 | | | Jt. Memorial Service 3:00pm LD 7 | | |
| 26 | 27 | 28 | 29 | 30 | 31 | 1 | |
| | | Bill and resolution draft requests due to LRC by 5:00pm (for unlimited introduction) LD 9 | | | Last day for unlimited bill and resolution introduction (JR 6B-3) (TWO HOURS prior to session) LD 11 | | |
| February 2025 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | All bill and resolution draft requests due to LRC by 5:00pm LD 13 | Committee bill and resolution draft requests due to LRC by 5:00pm LD 14 | Last day for introduction of individual bills and resolutions (TWO HOURS prior to session) LD 15 | Last day for introduction of committee bills and resolutions (TWO HOURS prior to session) LD 16 | | |
| | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| | | | | | Last day for JCA selection of general fund revenue targets (JR 7-11.1) LD 21 | | |
| | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| | Presidents' Day | | | | | | |
| 23 | 24 | 25 | 26 | 27 | 28 | 1 | |
| | Last day to move required delivery of bills or resolutions by a committee to the house of origin, and Last day to use JR 5-17 LD 26 | Last day to pass bills or joint resolutions by the house of origin (Crossover Day), and Last day to invoke JR 7-7 in the house of origin LD 27 | | Last day for JCA to move required delivery of special appropriation bills to house of origin (JR 17-1) LD 29 | | | |
| March 2025 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
| | | Last day for house of origin to pass special appropriation bills referred from JCA (JR 17-1), and Commemoration requests due to LRC by 5:00pm LD 30 | | JR 5-13 in effect, and Last day for introduction of commemorations (TWO HOURS prior to session) LD 32 | Last day to move required delivery of bills or joint resolutions by a committee to the second house LD 33 | | |
| | 9 | 10 | 11 | 12 | 13 | 14 | 15 |
| | | Last day for a bill or joint resolution to pass both houses, and Last day to invoke JR 7-7 in the second house LD 34 | | | | | |
| | 16 | 17 | 18 | 19 | 20 | 21 | 22 |
| 23 | 24 | 25 | 26 | 27 | 28 | 29 | |
| April 2025 | 30 | 31 | 1 | 2 | 3 | 4 | 5 |
| | | Reserved for consideration of gubernatorial vetoes LD 38 | | | | | |

Adopted: 3/5/2024

STANDING COMMITTEES

100th Legislative Session Meeting Schedule – 2025



| TIME | ROOM | MONDAY WEDNESDAY FRIDAY | TUESDAY THURSDAY |
|---------------------------------------|--------------------|---|--|
| 7:45 – 9:45 a.m. | 414 | House State Affairs Rep. Scott Odenbach, Chair John McCullough, Staff | House Ag & Natural Resources Rep. Marty Overweg, Chair Lance Nixon, Staff |
| 7:45 – 9:45 a.m. | 413 | House Education Rep. Lana Greenfield, Chair Jacob Carlson, Staff | Senate Judiciary Sen. David Wheeler, Chair Melanie Dumdei, Staff |
| 7:45 – 9:45 a.m. | 412 | Senate Health & Human Services Sen. Kevin Jensen, Chair Matthew Server, Staff | House Health & Human Services Rep. Brian Mulder, Chair Anna Madsen, Staff |
| 7:45 – 9:45 a.m. | 423 | Senate Transportation Sen. Randy Deibert, Chair Lance Nixon, Staff | Senate Education Sen. Kyle Schoenfish, Chair Jacob Carlson, Staff |
| 7:45 – 9:45 a.m. | 464 | | House Taxation Rep. Aaron Aylward, Chair Will Steward, Staff |
| 10:00 a.m. – Noon | 414 | Senate State Affairs Sen. Jim Mehlhaff, Chair Anita Thomas, Staff | House Local Government Rep. Greg Jamison, Chair Matthew Server, Staff |
| 10:00 a.m. – Noon | 413 | House Judiciary Rep. Mike Stevens, Chair Melanie Dumdei, Staff | House Transportation Rep. Tony Randolph, Chair Amanda Marsh, Staff |
| 10:00 a.m. – Noon | 412 | Senate Local Government Sen. Tim Reed, Chair Hillary Larsen, Staff | Senate Commerce & Energy Sen. Casey Crabtree, Chair Rachel Hale, Staff |
| 10:00 a.m. – Noon | 423 | Senate Taxation Sen. Steve Kolbeck, Chair Will Steward, Staff | Senate Ag & Natural Resources Sen. Tom Pischke, Chair Hillary Larsen, Staff |
| 10:00 a.m. – Noon | 464 | House Commerce & Energy Rep. Karla Lems, Chair Rachel Hale, Staff | |
| 8:00 a.m. – Noon | Appropriations 362 | Joint Committee on Appropriations Sen. Ernie Otten, Lead Co-Chair, Rep. Mike Derby, Co-Chair Mehlhaff, Jessop, Knofczynski, Douglas, Honan, McDonald, Kaitfors, Staff | |
| Meets at the Call of the Chair | | Government Operations & Audit (Chairs: Sen. Howard & Rep. Overweg/Auditor General/Melanie Dumdei) Legislative Procedure (Chairs: Rep. Hansen & Sen. Karr/John McCullough) Mil. & Vet. Affairs (Chairs: [H/MWF PM] Rep. Goodwin & [S/TTH PM] Sen. Zikmund/Matthew Server) Retirement Laws (Chairs: Sen. Deibert & Rep. Weisgram/Jeff Mehlhaff, Mitch Honan) | |

This schedule and all Legislative Research Council documents are available on the LRC home page: sdlegislature.gov.

South Dakota BOARD of PHARMACY

Tyler Laetch, PharmD // Executive Director

SD Board Welcomes New Registered Pharmacists/Pharmacies

Congratulations to the following sixteen candidates who recently met licensure requirements and were licensed as new pharmacists in South Dakota: Alexa Nuese, Janaya Lewis, Jaxson Schmaltz, Jordan Stein, Kaleb Crownover, Faith Bader, Abby Fuller, Amanda, Hjaige, Curtis Alexander, Kristin Cisneros, Taylor Pies, Thomas Farley, Edward Ming, Tyler Twardoski, Joseph Elkins, and James Montague.

One SD full-time pharmacy license was issued to Vilas Pharmacy in Pierre 100-2098, and one new part-time pharmacy license was issued to Avera Long Term Care Pierre #200-1767.

Department of Social Services – Let's Be Clear Website Update by Shaina Smykle, Substance Use Prevention Program Manager

The South Dakota Department of Social Services, in collaboration with the South Dakota Department of Health, launched Let's Be Clear on November 14, 2024, moving away from the Avoid Opioid brand created in 2017. To support the work and brand recognition established by previous efforts, the new brand carries forward some of the previous coloring, fonts, and graphics, complementing a smooth transition rather than a complete departure.

Let's Be Clear focuses on increasing awareness, reducing stigma, and spreading resources for prevention, treatment, and recovery from opioid use disorder, substance misuse, and substance use disorder across the state of South Dakota. For more information, visit <https://letsbeclearsd.com/>.



PharmaDrop™ Drug Take-Back Program by Melissa DeNoon, PDMP Director

The Board established a drug take-back program in 2017 to reduce the avenue of diversion created by unused, unwanted, and expired drugs in an individual's medicine cabinet. Trilogy MedWaste's PharmaDrop™ receptacles were placed in South Dakota hospitals and retail pharmacies. This program was initially funded through a federal PDMP grant and is currently being funded through a South Dakota Department of Social Services federal grant. Since its inception, the program has placed 87 permanent drug take-back receptacles across South Dakota and enrolled an additional five locations that already had their own receptacles to the South Dakota PharmaDrop™ program, bringing the total number of locations managed through the program to 92. A comprehensive list of permanent drug take-back sites can be found at [LetsBeClearSD.com](https://letsbeclearsd.com)

under the Prevention heading by selecting [Safe Medication Disposal](#). This program provides an option for the safe disposal of an individual's nonprescription and prescription drugs, including controlled substances, and is a key component in South Dakota's strategy to address our state's misuse, abuse, and diversion of controlled prescription drugs. If your pharmacy is not currently participating and would like to, please email Melissa.DeNoon@state.sd.us.

Free PDMP CE For All Pharmacy Staff by Melissa DeNoon, PDMP Director

The National Association of State Controlled Substances Authorities and 12 state prescription drug monitoring program (PDMP) administrators have once again collaborated on a free ACPE-accredited educational opportunity providing 1 hour of continuing education for pharmacists and pharmacy technicians. This program analyzes the importance and value of complete, accurate data reported by dispensers to PDMPs and assesses the impact of intentional or non-intentional data entry errors and data omissions on patient safety. It also discusses the downstream impacts of pharmacy reported PDMP data on clinical decision-making processes and helps pharmacy staff identify and implement changes that can be made in their practice setting to improve PDMP data integrity. PDMP staff encourages all South Dakota pharmacy staff to visit Talem Health's website at this [link](#) and take the course. If you received credit for this CE prior to 10/22/24, you are still able to retake the CE and receive credit.

Donated Prescription Drug And Medical Supply Redispensing Program Update by Jenna Heyen, Pharmacy Inspector

In Early 2024, the Donated Drug and Medical Supply Redispensing Program officially launched. The Board wanted to provide a review and an update on the program now that it has been in-place for nearly a year. The program may be new to some, so quick review of the details is beneficial.

Medications that may be accepted into the program must be in their original sealed packaging, which must include lot and expiration, and show no signs that the packaging has been tampered with. Donated medical supplies also must be in unopened or sealed packaging with no signs of being tampered with. For this program, controlled substances may not be accepted as donations, and medications that require storage other than room temperature are also not eligible for donation. It is the responsibility of the accepting pharmacy to ensure all criteria (outlined in [ARSD 20:51:35](#)) are met and to thoroughly inspect and document on the [Donation Record](#) found on the Board's website for each donation.

Patients who are eligible to receive a donated product are those who are indigent, lack third-party coverage for a medication/supply prescribed, or any other individual who can use an item donated to the program. All federal and state laws must be followed for the dispensing of any prescription drugs or supplies out of the program. A partnership with Optimum Perks has been established for the dispensing pharmacy to process the claim. When submitted the claim will process free of charge to the patient. Participating pharmacies are provided with the Optimum details upon entering the program. Dispensing pharmacies may charge the recipient a handling fee of up to \$25 for mailing, handling, or dispensing costs. Upon dispensation of a medication or supply from the program, there is a [Recipient Record](#) form that must be filled out and signed by the patient and dispensing pharmacist.

At this time, there are forty-six pharmacies signed up to accept donated prescriptions drugs and supplies and nine pharmacies that can dispense the donated items to patients. The Board encourages pharmacies to participate in this program as it has the potential to help patients across our state. Even if you are not a participating pharmacy you can still access the link on the Board website to the

South Dakota BOARD of PHARMACY

continued...

[Directory](#) which lists the participating pharmacies and the available products list. If you have a patient in need of a product on the directory contact the pharmacy listed and coordinate with them.

On the South Dakota Board of Pharmacy website, by following the [Donated Prescription Drug and Medical Supply Redispensing Program link](#), you will find all forms and links related to the program. If you are interested in becoming a participating pharmacy please contact the Board office if you have further questions or fill out the [Pharmacy Application](#) to become a participating pharmacy located on the Board's website.

Board of Pharmacy Reappointments

Tom Nelson and Curt Rising have been reappointed by the Governor to the Board of Pharmacy for another three-year term. This will be Tom Nelson's third full-term appointment and Curt Rising's second full-term appointment.

Board Meeting Dates

Please check the [Board of Pharmacy page on the Boards and Commissions Website](#) on the South Dakota Board of Pharmacy website for the time, location, and agenda for future Board meetings.

Respectfully submitted for the Board,

TYLER LAETSCH

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tyler.laetsch@state.sd.us

PDMP DIRECTOR

Melissa DeNoon, R.Ph.
melissa.denoon@state.sd.us

PDMP ASSISTANT

Brandi Dux brandi.dux@state.sd.us

ADMINISTRATIVE ASSISTANT

Melissa Wipf melissa.wipf@state.sd.us

PHARMACY INSPECTORS

Carol Smith, R.Ph. carol.smith@state.sd.us
Lee Cordell, Pharm. D. lee.cordell@state.sd.us
Jenna Heyen jenna.heyen@state.sd.us

SENIOR SECRETARY

Beth Windschitl beth.windschitl@state.sd.us



South Dakota SOCIETY of HEALTH-SYSTEM PHARMACISTS

Jenna McGeehon, PharmD // SDSHP President



Greetings and Happy New Year from the South Dakota Society of Health-System Pharmacists! As we enter the new year, I am excited to provide a brief recap of recent happenings and to share a preview of upcoming events as well.

In December, we hosted **Dakota Night** during ASHP's Midyear

Clinical Meeting in New Orleans, Louisiana. The event was well-attended, and it was wonderful to see some familiar faces again this year. Each year, this event brings such happiness as our colleagues and friends gather together in a lively, bustling environment. We would like to extend our sincere gratitude to SDSU and NDSHP for making this event possible!

With the new year also comes time for **SDSHP membership renewal**. Membership terms coincide with the calendar year, so now is a great time to renew your membership! Membership fees are \$75 for pharmacists, \$20 for technicians, and \$5 for students. Membership renewal (or joining as a new member) can be done quickly and easily on our website (www.sdsHP.com). As in previous years, SDSHP also continues to offer a 50% discount on membership for any current member who recruits a new member (membership is also discounted 50% for the new member). Anyone interested in this offer should contact SDSHP directly at info@sdsHP.com rather than renewing or joining online.

It's hard to believe, but the **2025 SDSHP Annual Conference** is just around the corner! This year's annual conference will be held at the Lodge in Deadwood, SD April 11 -12th. The Annual Meeting Planning Committee has a wide variety of relevant and high-quality continuing education planned, including a noteworthy keynote speaker, Rick Melmer, who will discuss dynamics of a team as well as provide a DISC assessment for participants. In addition to our keynote, our Annual Meeting committee has an exciting schedule of topics including pharmacogenomics, 340B, clinical trials and guideline updates, preceptor development, legislature and much more! We look forward to gathering to learn and network with each other during this fun event!

Last, but certainly not least, our Continuing Education Committee has been hard at work preparing for our upcoming **Resident CE Seminars** presented by pharmacy residents from across the state. The CE Seminars will be hosted in-person with the opportunity to attend virtually as well. This format will allow residents to present in front of a live audience while also allowing pharmacists from across the state to tune in. SDSHP is partnering with Avera again this year to provide these ACPE-accredited continuing education presentations for our members.

To keep up with information regarding the Annual Conference, Resident CE Seminars, and other SDSHP updates, don't forget to check out our Facebook page, LinkedIn page, Instagram account (@sdsHP_rx), or website!

Respectfully submitted,

JENNA MCGEEHON

SDSU's Student Collaboration for the ADVANCEMENT and PROMOTION of PHARMACY

Aubrey Kooima // SCAPP/APhA-ASP SDSU Chapter President



The fall semester within SCAPP has been filled with numerous patient care events, member social activities, and speakers from all areas of pharmacy. Our committee chairs stayed busy hosting events such as diabetes and HPV education at the Brookings Farmers Market, flu shot clinics, and trivia nights. After one of our chapter

meetings, we teamed up with SDSU's State-A-Thon to make tie blankets for the Sanford Children's Hospital and Avera McKennan Hospital. If you were at the Hobo Day Parade, you might have seen the College of Pharmacy and Allied Health Professions parade float, which SCAPP put together. We were given an award for the third year in a row, with this year winning the Best Representation of Tagline Award!



Our SSHP President and President Elect, Emily Tisler and Faith Richards, hosted two successful residency showcases where thirty total residency programs participated. P1s

through P4s attended and were able to learn more about these programs while learning valuable residency information. The P3 students in Sioux Falls hosted a P3, Faculty, and Staff potluck that brought a time of great conversation, laughter, and full bellies before finals week.



As we look forward to the Spring semester, I would like to relay both sad and exciting news. SCAPP President Elect, Erika Munchrath, decided to change majors and stepped down from her President Elect role. We are sad to see her go but wish her the best as she pursues a nursing degree. With that, SCAPP is excited to announce that Ryan Johnson, P1 student, was elected in December as our new SCAPP President Elect. He has been a tremendous member for the past few years and will continue serving as our Membership Vice President and now SCAPP President Elect through the remainder of the school year.

We thank you all for your support thus far in the school year, and we hope each of you had a wonderful Holiday Season with friends and family!

Sincerely,

AUBREY KOOIMA



SDSU COLLEGE of PHARMACY and ALLIED HEALTH PROFESSIONS

Dan Hansen, PharmD // Dean and Professor



Greetings from the College of Pharmacy and Allied Health Professions! The Fall Semester is wrapping up as we look back on an eventful few months. We celebrated Hobo Week, held our Fall Convocation and Research Day, and our MLS White Coat ceremony. We also participated in SDSU's 10th Annual Pack the Pantry Food

Drive, and our college received first place, contributing 2377 of the 2823 food items collected!

For big news from the last few months, the South Dakota Perinatal Quality Collaborative (SDPQC) was founded within our Community Practice Innovation Center. With the founding of the SDPQC, South Dakota became the 50th and final state to have its own Perinatal Quality Collaborative. The SDPQC will begin with the BIRTH-SD work, as well as seek additional funding for programs to improve the state of perinatal health in South Dakota. One of our faculty, Stephanie Hanson, is the founder and Executive Director.

Our START-SD team (whose work focuses on prevention, treatment, and recovery of substance use disorder in the state), was awarded a 4-year, \$3 million grant from the Health Resource and Services Administration. The work that will be completed through this grant includes working with three prisons in South Dakota to increase reentry resources and programming for those exiting SD prisons and their loved ones.

Our Medical Laboratory Science program received new, state-of-the-art microscopes and other equipment, thanks to a \$750,000 award from the Centers for Disease Control through the South Dakota Department of Health. The new equipment will make learning more accessible, including facilitating the remote offerings within the MLS program.

We had five students join us from the Kwame Nkrumah University of Science and Technology in Ghana. During their stay, these students participated in different educational and clinical activities during their time here. Additionally, two of our pharmacy students, Sierra Schmidt and Tony Tran, went to Vietnam to participate in a five-week Advanced Pharmacy Practice Experience rotation. They are the first SDSU pharmacy students to complete a rotation in Vietnam.

Our newest faculty member, Mike Farley, joined us in October. Mike is an associate professor and the new Gary & Sharon Van Riper Scholar of Practice Innovation.

Finally, in September, the Board of Regents accepted our proposal to add the Pharm.D. program to the list of majors included in SD Advantage, effective Summer 2025. This change now makes it more affordable for a student from any SD Advantage state (Minnesota, Kansas, Missouri, Montana, Wyoming, Colorado, Nebraska, North Dakota, Wisconsin, Illinois, and Iowa) to attend pharmacy school at SDSU.

FACULTY & STAFF HIGHLIGHTS

Emily Van Klompenburg, Amelia Koster, Jacob Ford, and Shanna O'Connor had an article titled "Examination of Differences Between Actual and Potential Revenue Generation in a Pharmacist-Run Ambulatory Clinic" published in the Journal of the American Pharmacists Association.



SDSU COLLEGE of PHARMACY and ALLIED HEALTH PROFESSIONS



continued...

Alex Middendorf, Deidra Van Gilder, Erin Miller, and others, had an article published in Innovation in Pharmacy titled “Development, Pilot, and Evaluation of a Qualitative Documentation Tool for Pharmacists to Share High Impact Patient Intervention Stories.”

Shanna O’Connor was joined by Jenny Bacci from the University of Washington for an AACP webinar titled Medical Billing 101 for Pharmacy Educators.

Shanna O’Connor and colleagues from the University of Washington and Idaho State, recently had a commentary published in the American Journal for Pharmaceutical Education titled “It Can No Longer Be Optional—Medical Billing in the PharmD Curriculum.”

Erin Miller, Sarah Schweitzer, and Christopher Robbins had an article published in BMC Public Health titled “Perceptions of substance use disorder in rural areas: how the brain disease model impacts stigma.”

Chris Robbins had an abstract accepted for the American Academy of Health Behavior Conference. It is titled “Gunowner Demographics and State Gun Law Rankings as Predictors for Attitudes Related to Gun Safety Policy: Data from the 2021 National Firearms Survey” and will be presented in March.

April Nelsen was part of a panel discussion at the American Society for Clinical Laboratory Science, Region V meeting in October.

The Annual State Conference for Respiratory Therapists was held in October. Marissa Trosen was recognized as the Respiratory Therapist of the Year for the State of SD.

Hemachand Tummala was elected to be the Chair-Elect of the Pharmaceutics SIG in AACP.

We had several faculty present at the ASHP Mid-Year Meeting in New Orleans in November:

- Bri Jansma Vant Hul presented “Emergency Medicine Pearls 2024” and “Valproic Acid Monitoring: More Than Just a Number.”
- Joe Berendse and Tadd Hellwig presented “Bayou Blues and Hepatic Hues: Deciphering Clinical Conundrums in Liver Disease.”

We had several faculty present at the 2nd Annual SDSU SOTL Symposium:

- Brittney Meyer and some colleagues from the College of Nursing presented “Optimizing Interprofessional Team Composition and Delivery in Healthcare Simulation.”
- Chris Robbins presented a poster titled “Improving Student Achievement and Satisfaction Using a Focused Course Content Analysis.”
- Brad Laible, Shanna O’Connor, Deidra Van Gilder, Jordan Baye, Brittney Meyer, Jim Clem, and Jansma Vant Hul presented a poster titled “Student Performance and Perceptions Following Implementation of a New Drug Competency Assessment (DCA) Sequence.”
- Joe Berendse presented a poster titled “Integrating a Naloxone-Focused Population Health Management Experience into an Ambulatory Care Advanced Pharmacy Practice Experience.”

We had several faculty and staff present at the American Public Health Association annual meeting:

- Sarah Schweitzer, Erin Miller, Christopher Robbins, Stephanie Hanson, Alex Middendorf, Deidra Van Gilder, April Nelsen, Irene Arango Gomez, and Sangah Park presented “Role of Mobile Pharmacy Services Facilitating Patient Care in Underserved Populations”
- Sarah Schweitzer and Keri Pappas presented “30 Professionals Under 30 Transforming Public Health in South Dakota.”

Several faculty, staff, students, and alumni were included in a 30-under-30 for Public Health in South Dakota, which was presented at the American Public Health Association annual meeting and posted online: Stephanie Hanson, Jacob Ford, Cedric Cogdil, Irene Arango Gomez, Keri Pappas, and Sarah Schweitzer.

STUDENT HIGHLIGHTS

At the 9th Annual USD Geriatric Symposium, our PGY1 resident, Tara Gilk, presented on the role of pharmacists in educating other members of the healthcare team, as the medication expert.

We had several pharmacy students present their research at the Sanford Improvement Symposium:

- Kyle Butzke and Anna Schelonka: Efficacy of cefdinir in the outpatient treatment of gram-negative bacteremia
- Jillian Songstad: Fast forward to reversal: Time to four-factor-prothrombin complex concentrate (4F-PCC) administration
- Anjali Parmar and Jane Ardry: Haloperidol vs. capsaicin in the treatment of cannabinoid hyperemesis syndrome
- Sadie Fedders: Ketamine-associated delirium in the PICU

- Tayaih Millier: Efficacy of levetiracetam for status epilepticus in children.
- Abigail Riesgraf and Jillian Songstad: Evaluation of the use of potassium binders in kidney transplant patients
- Emily Tisler: Making it count: evaluating an intervention to increase usability of factor Xa inhibitor anti-Xa levels

Several students presented at the ASHP Mid-Year Meeting in New Orleans in November:

- Rachna Tungaturthi and Abby Abraham presented a poster titled “Haloperidol vs. Capsaicin in the Acute Treatment of Cannabinoid Hyperemesis Syndrome.”
- Madeiline Osborn and Anna Schelonka presented a poster titled “Efficacy of Cefdinir in the Outpatient Treatment of Gram Negative Bacteremia.”
- Jessica Pfeifer, David Delahoyde, Austin Manuell, and Tadd Hellwig presented a poster titled “Evaluating the Utilization and Efficacy of the Khorana Score in Preventing VTE.”
- Lexi Barbush, Sadie Fedders, and Brooklyn Huberty presented a poster titled “Ketamine-Associated Delirium in the Pediatric Intensive Care Unit.
- Brandon Florey, Madison Hamel, Abigail Riesgraf, and Jillian Songstad presented a poster titled “Evaluation of the Use of Potassium Binders in Kidney Transplant Patients.”

Best regards,

DAN HANSEN



South Dakota Association of Pharmacy Technicians Seeks New Leadership

The South Dakota Association of Pharmacy Technicians (SDAPT) is an affiliate organization of SDPhA. A long-standing affiliate agreement has meant that members of SDAPT, are also members of SDPhA, receive our communications, and enjoy reduced rates on continuing education, events and other programming.

For many years, the same group of officers ran the technician association. SDAPT put out the call, hoping some new officers would step forward. As a result of not having anyone step forward in response to the requests, unfortunately SDAPT has been inactive for some time. Technicians play such a vital role in our pharmacies; we would love to see their association back in action and thriving.

“We have so many incredible technicians in South Dakota,” said Jessica Strobl, SDPhA Past President. “Each year the technician category for our annual awards is the one with the most nominations, and the one that’s

the most difficult to decide. We have so many exceptional people in these roles – I know the right people are out there to fill these positions.”

Strobl encourages every pharmacy technician to consider whether it’s time for them to take the “next step” to grow their skills by leaning into the idea of joining the SDAPT team. She also asks every pharmacist to reach out to their technicians and encourage them to carefully consider learning more about SDAPT, and whether they would enjoy the opportunity to join a team to help lead that association.

“We’re looking for some energetic techs who have a love for their profession, and the drive to help bring their peers together and reach for greater knowledge and heights for this extremely important role in our pharmacies.”

To learn more about SDAPT and the opportunities to get involved, please reach out to [Jessica Strobl](#) or [Amanda Bacon](#).



South Dakota Pharmacy Association Continues to Offer Low-Cost Technician Training

The SDPhA board is committed to strongly supporting pharmacy technicians, including finding them, training them, and keeping them. We know this is becoming an even more pressing issue now than perhaps ever before.

SDPhA is pleased to continue to offer low-cost access to this TRC’s online training module, Pharmacy Technician University. After careful deliberation given the current financial circumstances, the board decided to enter into a new two-year contract (negotiated down from three years) to continue provide PTU. We believe this program is so important we continue to offer it at a greatly reduced cost, which effectively just covers our costs.

In the past 6 years, SDPhA has now enrolled more than 200 participants. We are also thrilled to report we continue to work with student participants enrolled in the DIAL Virtual Program for the 2024-2025 school year. The DIAL program works with high schools throughout South Dakota. 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 system, 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.

You can find out more about those [on our website](#). For more details and enrollment information, contact Amanda Bacon at amanda@sdpha.org or (605) 224-2338.





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- Quickly prepare new pharmacy technicians for work with entry-level, PTU 101
- Utilize Knowledge Assessment to gauge competency in key areas and on-board technicians quickly
- Keep pharmacy technicians current with the latest guidelines

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- Tailored curriculum, program components, and practice setting-specific courses
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- Completion of the assessment will identify the specific PTU 101 courses that need support



PTU 101

Designed for technicians seeking certification, this program offers 130+ hours of didactic training.

PTU National Standards

Designed for technicians seeking ASHP-ACPE accreditation, this program offers an entry-level program (400+ hours) and an advanced-level program (600+ hours).

Knowledge Assessment

Leveraging the support of PTU 101, Knowledge Assessment gauges technician competency in over 10 categories including pharmacology, calculations, laws and regulations, anatomy, compounding, and more.

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Preparing for Clinical Emergencies when Caring for Two: A Review on the Assessment and Management of Various Obstetric Emergencies in Pregnancy



Accreditation Information

The South Dakota State University College of Pharmacy and Allied Health Professions is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

It is the policy of the South Dakota State University College of Pharmacy and Allied Health Professions that all sponsored CPE programming present evidence-based information that is professionally objective and non-commercial / non-promotional.

Course Author

Kailey Meyer, Pharm.D., Avera McKennan Hospital and University Health Center

Credit Information

ACPE Activity Number: 0063-0000-24-001-H01-P 0063-0000-24-001-H01-T

Release Date: 2-8-2024

Expiration Date: 2-8-2027

Activity Type: Knowledge-based

Target Audience: Pharmacists and pharmacy technicians

CE Credits: 2.0 Contact Hour (0.20 CEUs)

Activity Fee: \$12

Contact Hour Details

To receive 2.0 Contact Hours (0.20 CEUs) of continuing education credit, participants will read the provided article, answer the test questions, and complete the course evaluation. A test score of 70% or better is required to earn continuing pharmacy education credit. If a score of 70% (4/5) is not achieved on the first attempt, participants can complete one retest at no additional charge. Credit upload to a participant's eProfile account will be completed within two weeks following successful completion of this course.



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Learning Objectives

Pharmacist Learning Objectives

1. Describe pharmacokinetic and pharmacodynamic changes in pregnant patients.
2. Understand evidence-based management for common obstetric emergencies.
3. Identify characteristics and symptoms associated with various obstetric emergencies.
4. Provide pharmacologic recommendations when presented with a patient in an obstetric emergency.
5. Review current treatment guidelines for the management of cardiac arrest in pregnancy.



System Requirements

Please ensure the computer system you plan to use meets the following minimum requirements:

- Operating System: Windows 7 or higher, macOS Sierra (10.12) or higher
 - Internet Browser: Chrome 30 or higher, Firefox 27 or higher, Internet Explorer 11, Microsoft Edge, Safari 9 or higher
 - Internet connection: Cable, High-speed DSL, and any other medium that is internet accessible.
 - Peripherals: Computer speakers or headphones
- Media Viewing Requirements:
Adobe Reader, HTML5



Education Disclaimer

The author(s) of this continuing education activity have made reasonable efforts to ensure that all information contained herein is accurate in accordance with the latest available scientific evidence at the time of publication. However, because information regarding medications, treatment guidelines, and other healthcare information is subject to constant change, the participant is advised to always confirm practice resources before applying any learned information in practice. Activities produced by SDSU Continuing Pharmacy Education are intended solely for purposes of supplementing health care professionals' knowledge. The opinions expressed in this educational activity are those of the faculty and do not necessarily represent the views of South Dakota State University College of Pharmacy and Allied Health Professions.



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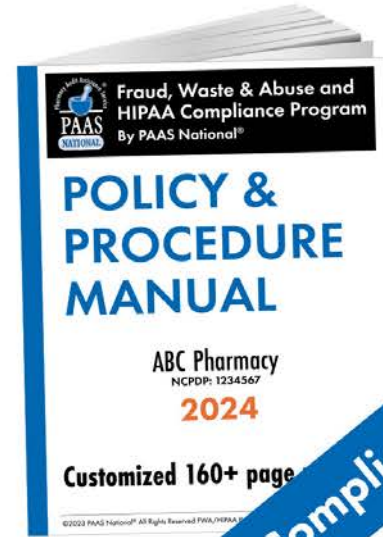
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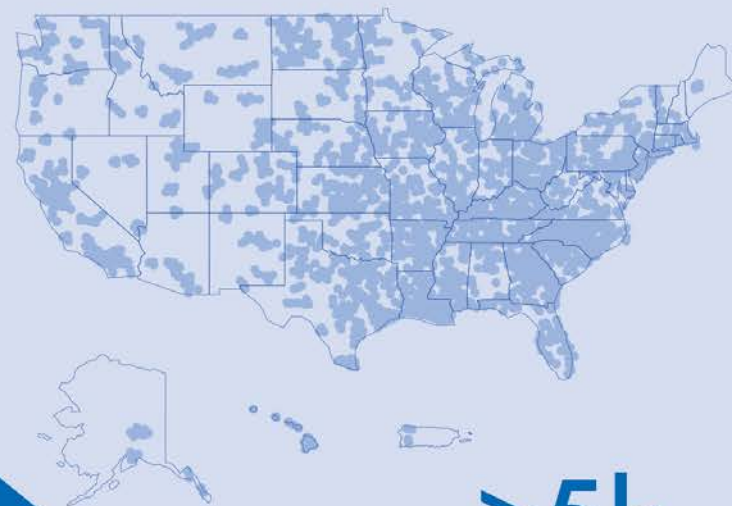
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SUPPLEMENTAL PROGRAMS

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Membership Requirements:

- Pharmacies involved in an audit must purchase a two-year membership.
- Pharmacies must enroll all stores under common ownership/management for audit assistance. There is a **multi-store discount** provided for those enrolling more than one store.
- FWA/HIPAA membership entitles a pharmacy up to 20 employees. Additional employees are \$15, billed annually.

PAAS National® casts a guiding light to steer you away from trouble.



Hundreds of Patient Information Requests for Medicare: What This Means for Your Pharmacy

Pharmacy personnel are all tasked with keeping patient protected health information (PHI) secure. When a request to access or release PHI is received by the pharmacy, panic may ensue if staff are not well versed in how to handle the requests to be compliant with [45 CFR §164.524](#)¹.

First, a patient must be granted access to their own medical records (unless otherwise indicated as per 45 CFR §164.524(a) (2) or (a)(3)) whether they are asking for a copy to be provided to them personally or directed to another entity. The Office for Civil Rights [OCR] takes a patient's right to access their records very seriously and will investigate [and potentially assess a monetary penalty] when a covered entity is found to not be appropriately following HIPAA Privacy Rules. The covered entity is encouraged to respond as soon as possible but must respond no later than 30 calendar days from the date of the request. If the covered entity is unable to comply with the request within 30 calendar days, they can be granted a one-time 30-day extension to their deadline, but they must notify the individual (in writing) of the reason for the delay and provide the date by which they will provide the records (refer to 45 CFR §164.524(b)(2) for additional information). Note some state privacy laws may be more stringent (e.g., Texas).

The request for PHI can be harder to validate when it is not coming from the patient for their own records. Recently, Anthem has been requesting information from numerous pharmacies across the United States. Each request has been issued by Episource, Datavant, or Cotiviti, purportedly on behalf of Anthem, Healthy Blue, or Wellpoint, and the request has been for patient information from January 2023 through current and can range from one patient to several dozen.

The request likely stems from recent investigations with the Office of Inspector General (OIG) looking into numerous Medicare Advantage plans which have uncovered an overabundance of up-coded claims with unsupported diagnosis codes. In an [OIG report](#)² posted September 25, 2024, they describe selecting one Medicare Advantage organization (Humana) and "focused on eight groups of high-risk diagnosis code (high-risk groups). Our objective was to determine whether Humana's submission of selected diagnosis codes to CMS, for use in CMS's risk adjustment program, complied with Federal requirements."

The results were astonishing! "For the eight high-risk groups covered by our audit, most of Humana's submission of the selected diagnosis codes to CMS for use in CMS's risk adjustment program did not comply with Federal requirements. Specifically, for 202 of the 240 sampled enrollee-years, the diagnosis codes that Humana submitted to CMS were not supported by the medical records and resulted in \$497,225 in overpayments." They go on to say, "On the basis of our sample results, we estimated that Humana received at least \$13.1 million in overpayments for 2017 and 2018."

Moreover, in October, OIG issued a report: [Medicare Advantage: Questionable Use of Health Risk Assessments Continues to Drive Up Payments to Plans by Billions](#)³. It is likely that Medicare Advantage plans are fearful that their claims are up for review next. With such a large potential for CMS overpayment, it is probable that OIG will continue to investigate and try to put a stop to this inappropriate spending.

If your pharmacy receives one of these requests, it should be given to your pharmacy's Privacy Officer for further evaluation and action.

PAAS Tips:

- Pharmacies are allowed to disclose PHI for the purposes of payment, treatment or healthcare operations (PTO)
 - For non-PTO authorized disclosures, document all HIPAA requests to access or release PHI
- All HIPAA-related documents must be maintained for a minimum of six years after the last effective date
- For additional guidance on grounds to deny the release of PHI, refer to 45 CFR §164.524(a)(2) and (a)(3)

If you are not a [PAAS FWA/HIPAA Compliance](#)⁴ member and you are interested in adding this service or learning more, please contact us at (608) 873-1342 or email info@paasnational.com

References:

1. <https://www.ecfr.gov/current/title-45/subtitle-A/subchapter-C/part-164/subpart-E/section-164.524>

2. <https://oig.hhs.gov/reports/all/2024/medicare-advantage-compliance-audit-of-specific-diagnosis-codes-that-humana-health-plan-inc-contract-h2649-submitted-to-cms/#:~:text=To%20determine%20the%20health%20status%20of%20enrollees,%20CMS%20relies%20on>
3. <https://oig.hhs.gov/reports/all/2024/medicare-advantage-questionable-use-of-health-risk-assessments-continues-to-drive-up-payments-to-plans-by-billions/>
4. <https://paasnational.com/fwac-hipaa/>



New Year, New Insurance, New Formularies!

With the new year approaching fast, many pharmacies are about to face the tedious task of getting patients' new insurance cards (and dealing with changing formularies, copays and deductibles). As onerous as that can be, your pharmacy should consider the opportunity to also ensure profile accuracy when adjusting the patients' billing information. Is the patient's address and phone number up to date? Do they have any allergies you may not have listed? Since a pharmacy employee is already in their profile adjusting the insurance information, it may be beneficial to verify that the demographics on file are still accurate.

While it is important to have current information for purposes of patient safety and accuracy, it's also a requirement for some PBMs. Section 10.08 of Caremark's Provider Manual highlights this requirement for maintaining up to date Part D patient information on their profiles. Often during an on-site visit, Caremark auditors will ask to see a covered Part D patient's profile, looking specifically for patient demographics and allergy information. While PAAS National[®] has not seen any significant recourse due to missing information on Part D patient profiles, consider validating these elements when updating insurance information.

New Year also means new formularies! Be cautious of incoming refills utilizing a DAW 9 as a new formulary could require the generic or a different drug entirely. PAAS suggests challenging a historical DAW 9 (by trying to bill the claim with the generic) with any new plan year, change in insurance or new prescription being authorized.

PAAS Tips:

- Be on the lookout for person codes or insurance cards with patient specific ID numbers
- If a claim is rejected due to a mismatch in the patient's date of birth submitted on the claim (versus the date of birth on file with the insurance company), call the patient to verify the correct date of birth.
 - If your system is correct and the insurance plan has documented the incorrect date of birth, be sure the patient contacts their plan (or Human Resources Department for employee-sponsored plans) and updates their information.
 - Changing the date of birth in your system to be incorrect (but match the PBM) is not advisable and can lead to dispensing errors and future claim issues.
- If you see a blank field in the allergies section of a patient's profile, confirm allergy information with the patient and update their file accordingly.
- If your system has "no known allergies" listed for a patient, periodically verify that this is still accurate, as some patients develop allergies and sensitivities to medications, ingredients and foods as they age.
- Be sure to include not only food allergies, but allergies to dyes as well. Some examples are as follows:
 - Progesterone capsules can be made using peanut oil
 - Some flu shots may not be appropriate for patients with egg allergies
 - Many medications have dyes in them to produce their coloring
 - Gelatin allergy is crucial to document on a patient's file, as many capsules are composed of gelatin

By Trenton Thiede, PharmD, MBA, President at PAAS National[®], expert third party audit assistance, FWA/HIPAA and USP 800 compliance.

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Understanding the Medicare Prescription Payment Plan (MPPP or M3P): What You Need to Know

As part of the Inflation Reduction Act, all Medicare prescription drug plans (Medicare Part D plans) – including both standalone Medicare prescription drug plans and Medicare Advantage (MA) plans with prescription drug coverage – will be required to offer the Medicare Prescription Payment Plans (MPPP or M3P). This option allows patients to manage their copays and deductibles evenly throughout the year, benefiting those facing high drug costs early in the year. While participation is optional, enrolled patients will have a \$0 copay at the pharmacy and will receive a monthly bill from their Part D or Advantage Plan, which features 0% interest and no fees. Patients can choose to enroll or opt out of the program at any time. Enrollment can be completed via phone, mail, or website of their selected Medicare Plan Sponsor. However, if patients fail to pay their bill by the end of the grace period (typically 60 days), they may be automatically opted out. It's important to note that pharmacies are not responsible for enrolling patients or collecting payments on an M3P bill (nor are pharmacies able to enroll patients).

Starting January 1, 2025, if a prescription copay for a Medicare beneficiary exceeds \$600, Plan Sponsors (via CMS directive) will require the pharmacy to provide the patient with the standard **"Likely to Benefit" Notice**¹ (CMS Form 10882). The notification to issue this notice will be sent as an online adjudication response Approved Message Code 056 from the PBM, indicating that the patient is "likely to benefit" from the M3P. Since the patient needs to contact the plan to enroll, it won't happen real time at the pharmacy counter. If the patient wants to opt in prior to picking up the prescriptions, they will need to return to the pharmacy at a later time once they have successfully enrolled. Once enrolled, all **unsold** prescriptions should be reversed and reprocessed to the Part D/MA plan, any secondary payor and then the M3P (i.e., the date of service should be the same for the Part D claim, any secondary payor [when applicable] and the M3P transaction). Prescriptions that were sold before opting in does not need to be submitted to the M3P processor, as the patient has already paid the copay.

If the patient has already opted in but does not have their M3P plan information, pharmacies can retrieve the necessary processing details by adjudicating a claim and checking for Approval Message Code 057. CMS mandates that all PCNs for M3P begin with "MPPP". Paid claim responses will include M3P processing details in the "Coordination of Benefits/Other Payors" segment of the claim information. Note the M3P processing information will not be found in the E1 eligibility response.

Other things to know:

- Maximum out-of-pocket costs for all Part D plans is now \$2000
- The M3P plan will only cover Medicare Part D eligible drugs
- Reimbursement to the pharmacy is the same 14-day timeframe

PAAS Tips:

- Make sure that the **"Likely to Benefit" Notice**¹ (CMS Form 10882) is being handed out every time there is an Approved Message Code 056
- LTC pharmacies are not exempt from distribution, although they may do so in the usual billing cycle
- Pharmacies should be prepared for onsite auditors to ask for the form and the pharmacy's policy for distributing.
- PAAS FWA/HIPAA compliance members have an update to their Policy and Procedure manual pushed out at the end of the year to reflect a new policy
- If a prescription is not picked up, pharmacies must reverse both the Part D and M3P claims

References:

1. <https://www.cms.gov/medicare/regulations-guidance/legislation/paperwork-reduction-act-1995/prd-listing/cms-10882>

By Trenton Thiede, PharmD, MBA, President at PAAS National®, expert third party audit assistance, FWA/HIPAA and USP 800 compliance.

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DID YOU KNOW?

50%

of pharmacy professional claims reported in 2022 were related to defending pharmacists and pharmacies before a regulatory entity.

\$430,375

Compounding pharmacies incur some of the most severe claim losses, with an average loss paid of \$430,375 in 2022.

\$8,821

The average loss paid for a license defense matter in 2022 was \$8,821.

\$1,605,288

Wrong directions/drug/strength claims accounted for \$1,605,288 of the total pharmacy malpractice claims in 2022.

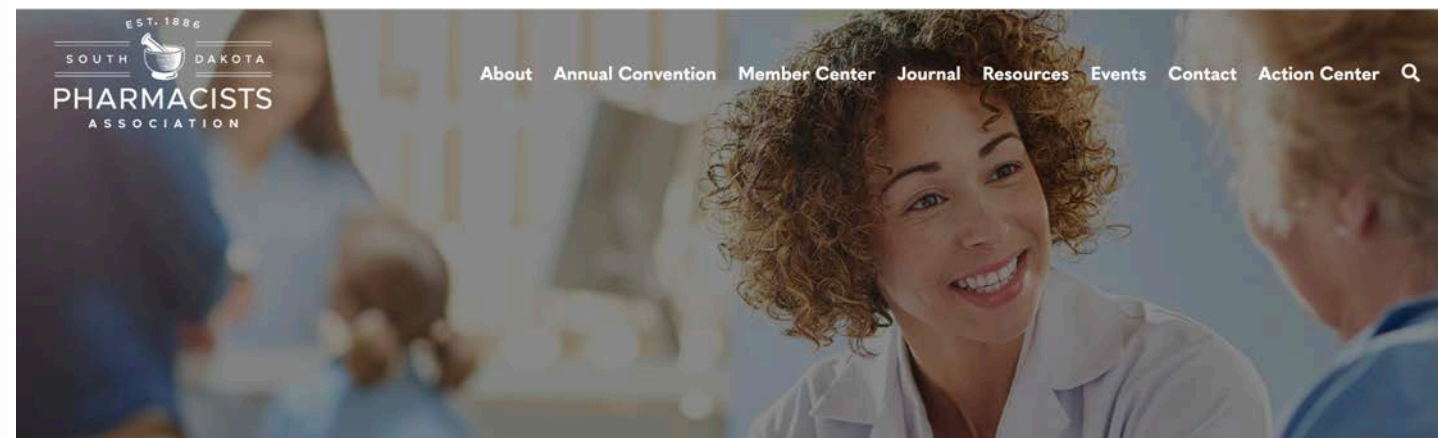
Based on Pharmacists Mutual claims reported 1/1/2023-12/31/2023.

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SDPhA NOTES & NEWS

Social Media and Email Blasts

Enhancing communication and fundraising will be an all-out blitz for 2025. Expect to see more from us in all these areas as we work to really drill down into the best methods of communication for our pharmacists, technicians, and students (coming soon – text alerts for those who opt-in!). We will provide weekly updates throughout Legislative Session, and you can watch for the launch of a new e-newsletter in your inbox after Session as well. 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 public awareness, and serving in the best interest of public health and pharmacy.

Website Updates

The website continues to expand and grow as a resource for the public and those in the profession. Recent changes include updates to the [PBM and Payer Resource page](#), and updates to the [Pharmacist Wellbeing](#) resource.

We continue to see even greater utilization of the new and improved [Action Center](#). We hope to bring even more updates to it for 2025! The Action Center has been a clear success, and we're excited about the customization this platform offers, and how it enhances our communication and messaging opportunities!

If you have information you think we should consider adding to our pages to make it even more useful for you – please let us know!

Classifieds

Classified Ad Rates

Classified ads are \$25 per five line ad per issue. Additional lines will be billed at \$1 per line. Including your company logo will be an extra \$5 charge.

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