



# Revisiting the Continuum of Pharmacist Prescriptive Authority

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# About NASPA

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The National Alliance of State Pharmacy Associations (NASPA), founded in 1927 as the National Council of State Pharmacy Association Executives, is dedicated to enhancing the success of state pharmacy associations in their efforts to advance the profession of pharmacy. NASPA's membership is comprised of state pharmacy associations and over 70 other stakeholder organizations. NASPA promotes leadership, sharing, learning, and policy exchange among its members and pharmacy leaders nationwide.





# Disclosures

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## **No financial interests to disclose**

**Krystalyn Weaver declares that she does not have an affiliation or financial arrangement with any ineligible companies that may have a direct interest in the subject matter of this continuing pharmacy education (CPE) activity within the past 24 months.**

# Learning Objectives

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After completing this activity, participants should be able to:

1. Explain the differences between dependent and independent pharmacist prescriptive authority.
2. Discuss the advantages and disadvantages of different models of pharmacist prescriptive authority.
3. Describe strategies for advancing pharmacist prescriptive authority in their state.
4. Explain how different models of pharmacist prescriptive authority may impact patient care.
5. Discuss the potential impact of broader pharmacist prescriptive authority on public health and access to care.



# Pre-Assessment Question 1

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What is the primary difference between dependent and independent pharmacist prescriptive authority?

- a) Independent authority allows pharmacists to prescribe medications autonomously, while dependent authority requires collaboration with a physician.
- b) Dependent authority gives pharmacists the ability to prescribe any medication.
- c) Independent authority is limited to specific medications, whereas dependent authority is unlimited.
- d) Dependent authority means pharmacists do not need a protocol in place.

# Pre-Assessment Question 2

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Which of the following is an advantage of independent prescriptive authority for pharmacists?

- a) It requires less training
- b) It allows for broader access to care without the need for a formal agreement with a physician
- c) It is more limited in scope than dependent authority
- d) It is restricted to certain medications



# Pre-Assessment Question 3

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Which strategy could be most effective in advancing pharmacist prescriptive authority within a state?

- a) Reducing collaboration with other healthcare professionals
- b) Advocating for a population-based collaborative practice agreement (CPA)
- c) Collaborating with all relevant stakeholders, including the state pharmacy association, board of pharmacy, schools of pharmacy, and public health
- d) Avoiding participation in legislative discussions



# Pre-Assessment Question 4

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How might patient care be impacted by the implementation of independent pharmacist prescriptive authority?

- a) It would likely lead to more restricted care options
- b) It could improve access to care for minor ailments
- c) It would only benefit institutional healthcare settings
- d) It would create more barriers for pharmacists





# Pre-Assessment Question 5

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What is a potential public health benefit of expanding pharmacist prescriptive authority?

- a) Increasing dependency on physician approval
- b) Expanding access to timely care for underserved populations
- c) Limiting the range of conditions pharmacists can treat
- d) Reducing the need for pharmacist involvement in patient care

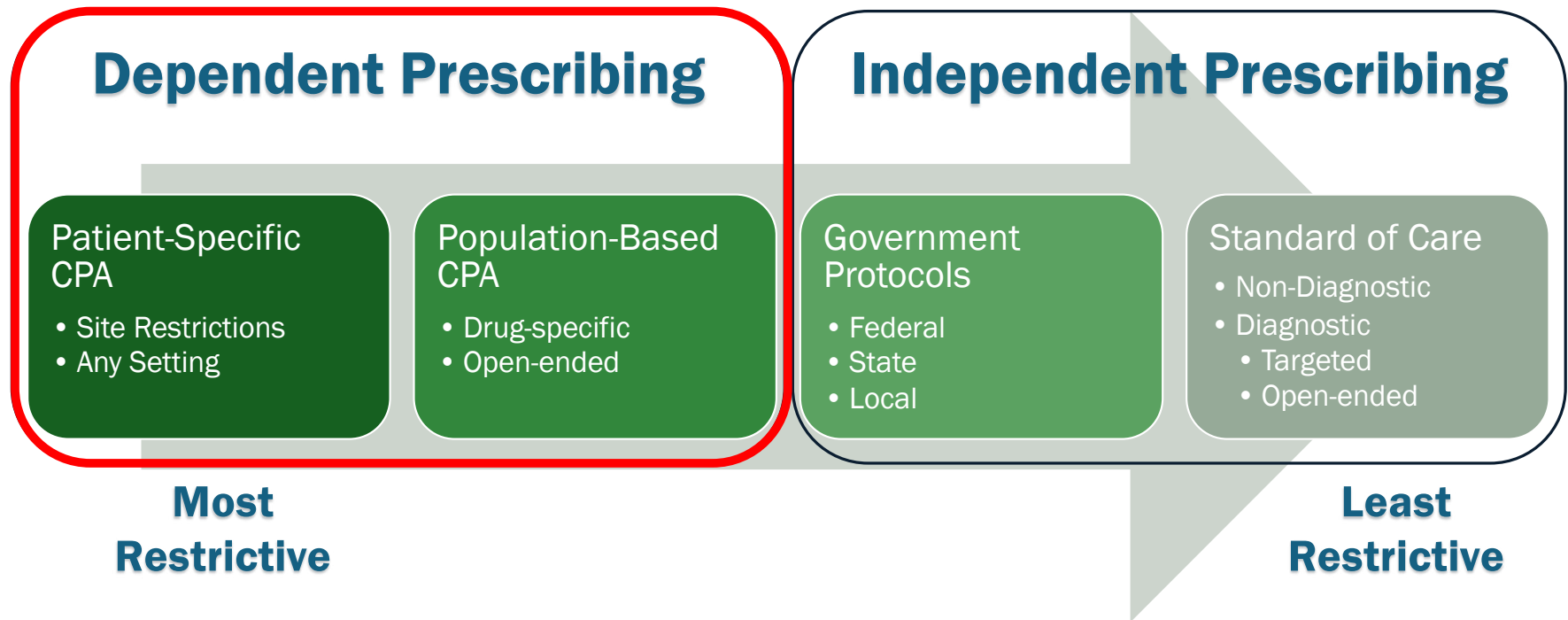


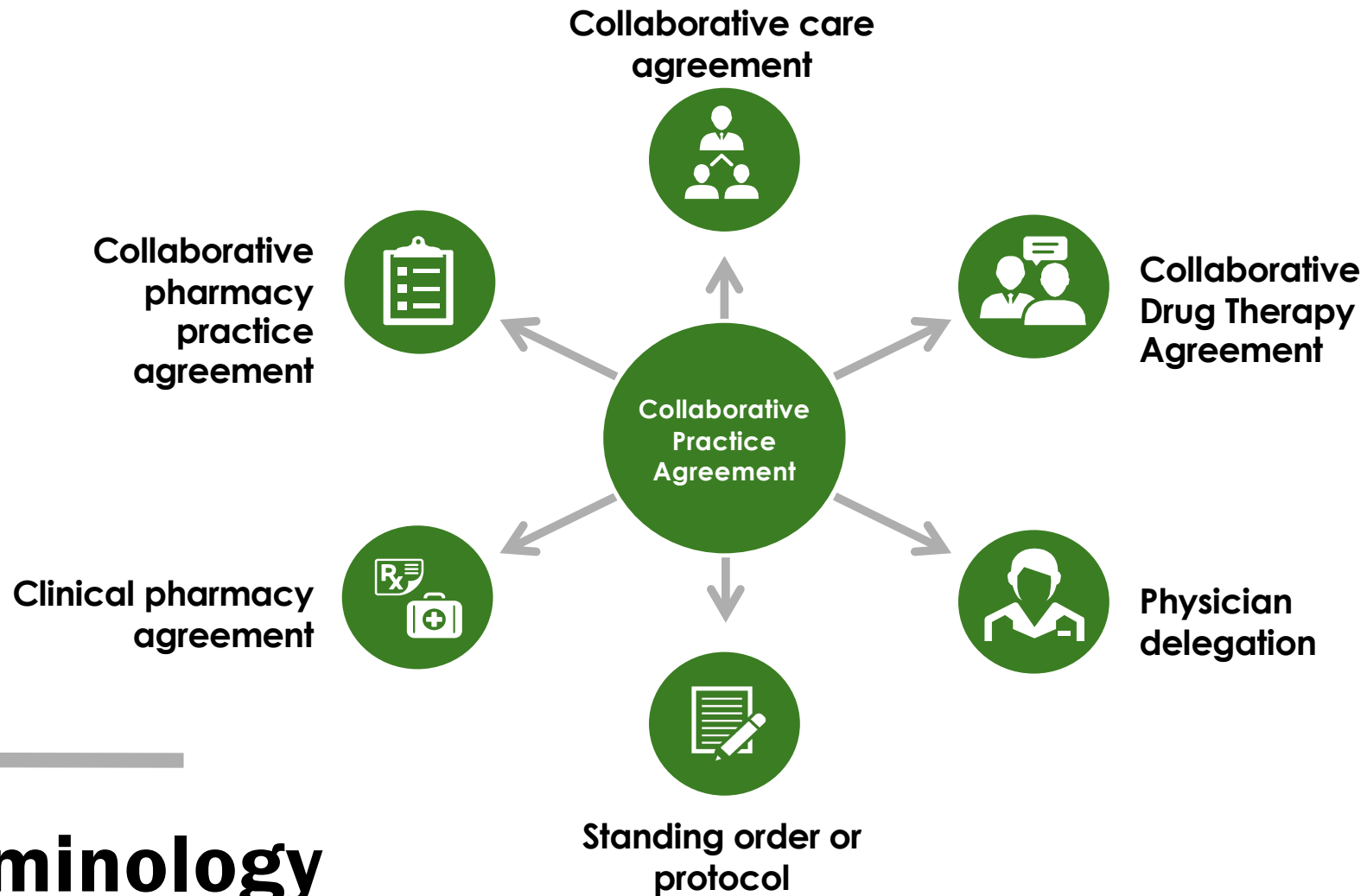


**The Pharmacist  
Prescribing  
Continuum**

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# The Pharmacist Prescribing Continuum





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# Terminology



**Establish a formal  
relationship**



**Delegate patient  
care functions**



**Contain negotiated  
conditions**

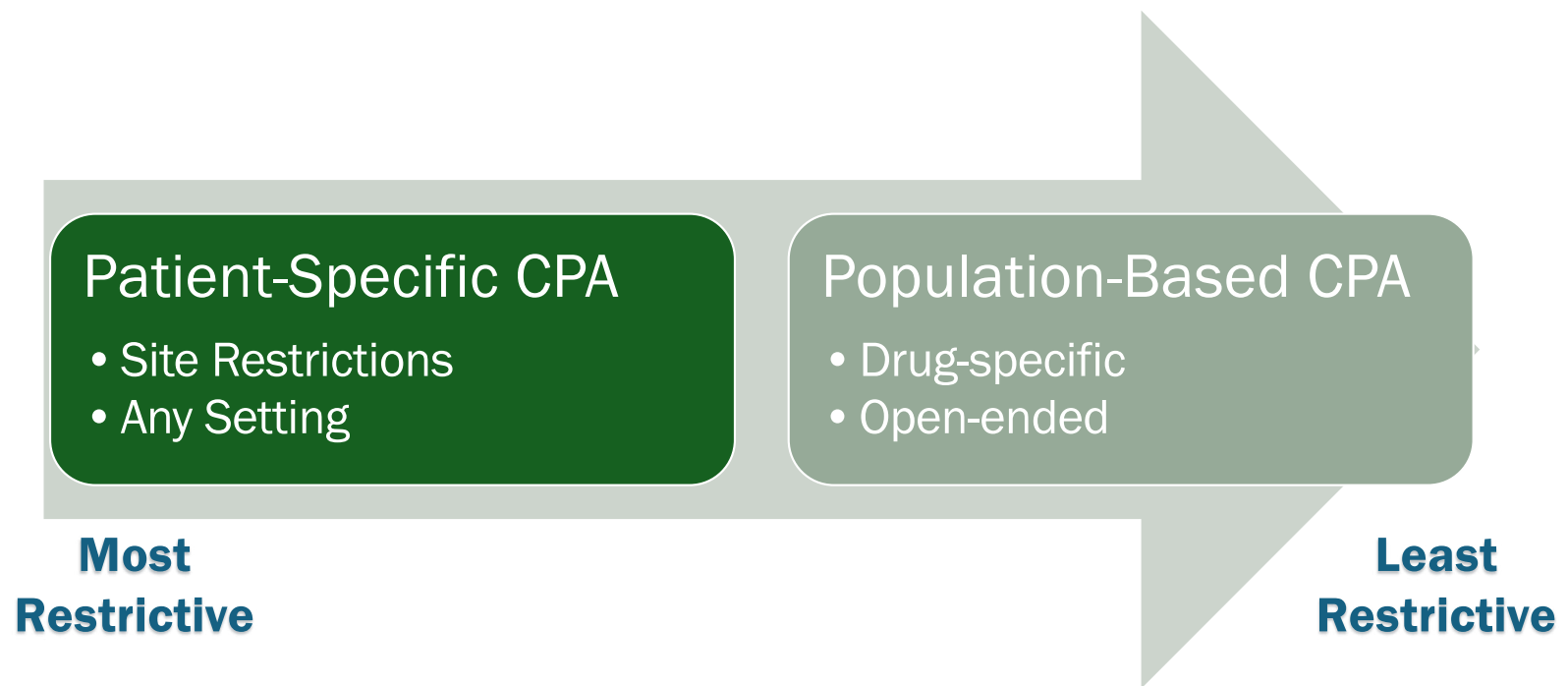


## **Collaborative Practice Agreements**

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# Complicated Regulatory Structure

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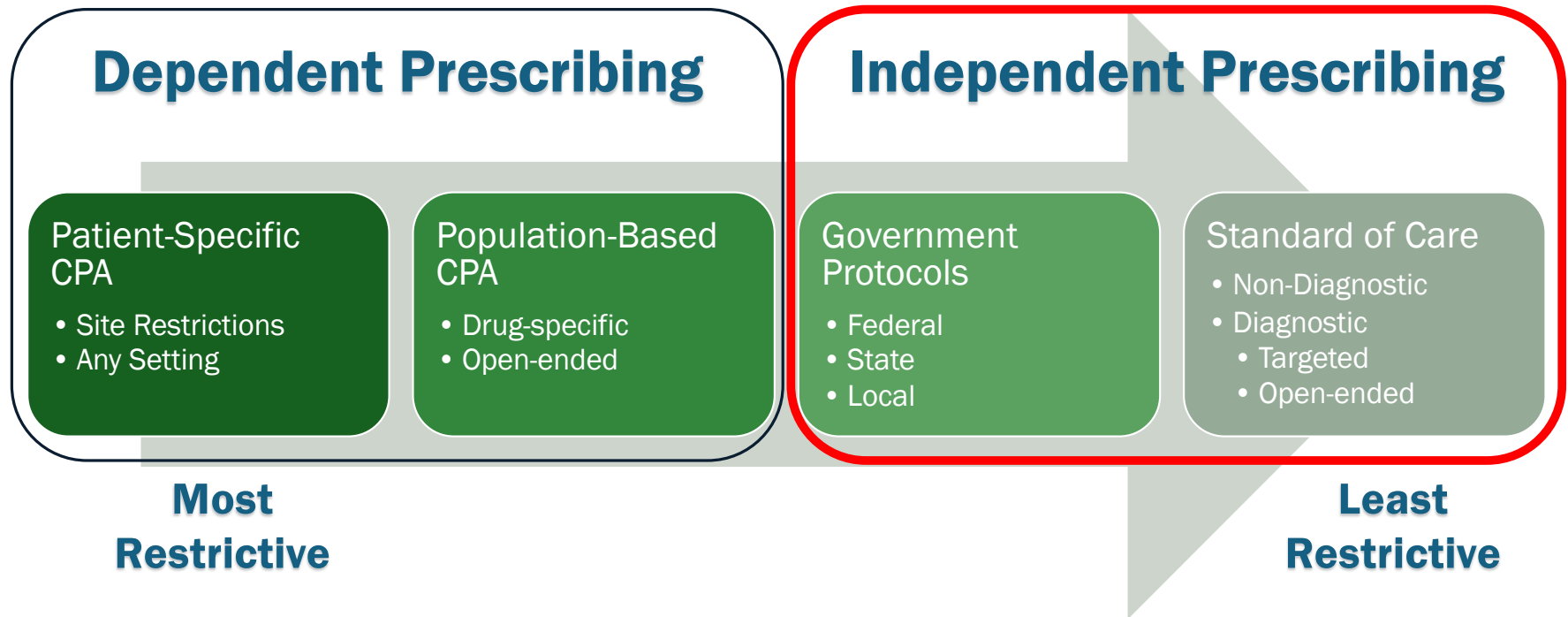




# Moving Forward

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# The Pharmacist Prescribing Continuum





Federal,  
statewide, or  
local authority

Allow  
pharmacists to  
prescribe

Address public  
health goals

Do not require  
differential  
diagnosing

More consistent,  
quicker  
implementation

Subject to  
political forces



## **Government Protocols**

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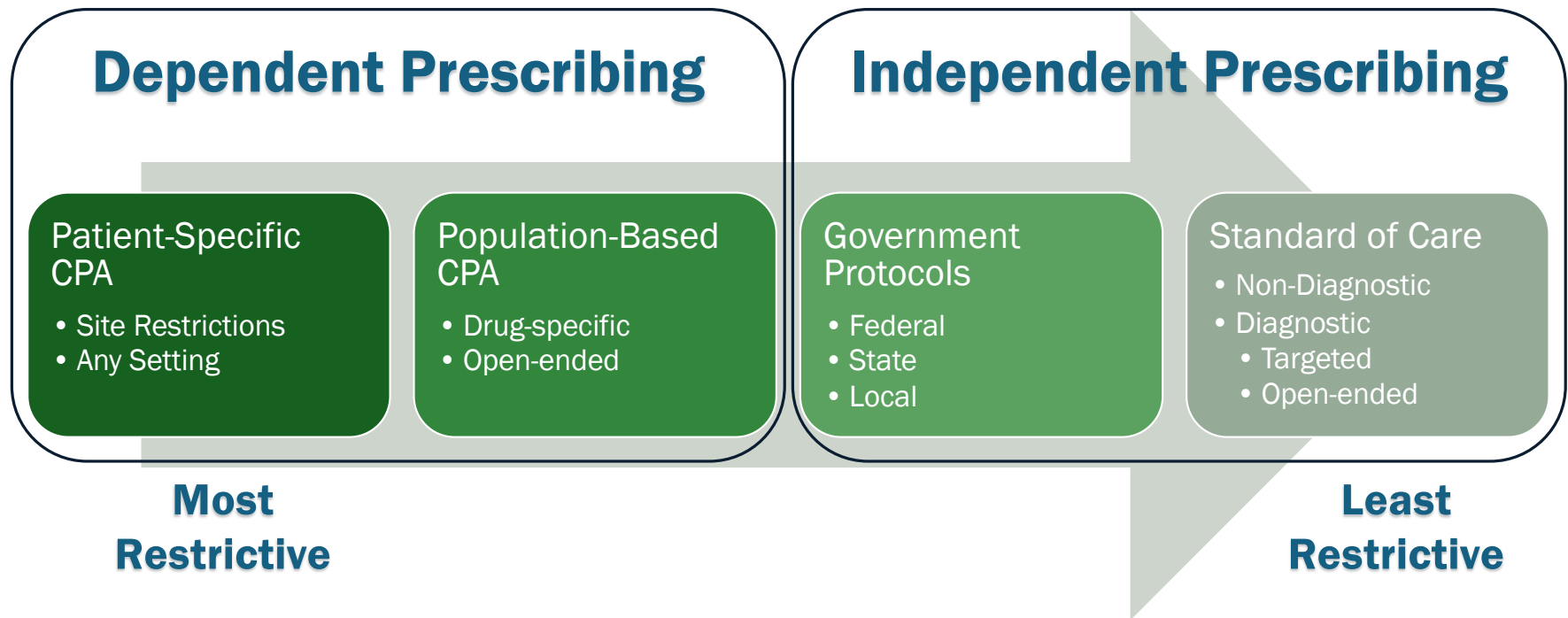
# Standard of Care Prescribing

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- Pharmacists use professional judgment within standard of care
- No specific government protocol required
- Flexible: Adapts with new evidence
- Broad scope possible
- Increases pharmacist autonomy and responsibility



# The Pharmacist Prescribing Continuum





# **Strategies for Advancing Pharmacist Prescriptive Authority**

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## **Patient Care**

- Potential for improved access to medications
- Enhanced role of pharmacists in chronic disease management
- Opportunities for preventive care and public health services

## **Practice**

- Align incentives: Improve working conditions and patient safety
- Align authority with education
- Ever growing appreciation for pharmacists' impact



## **Impact**

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# Post-Assessment Question 1

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# Post-Assessment Question 4

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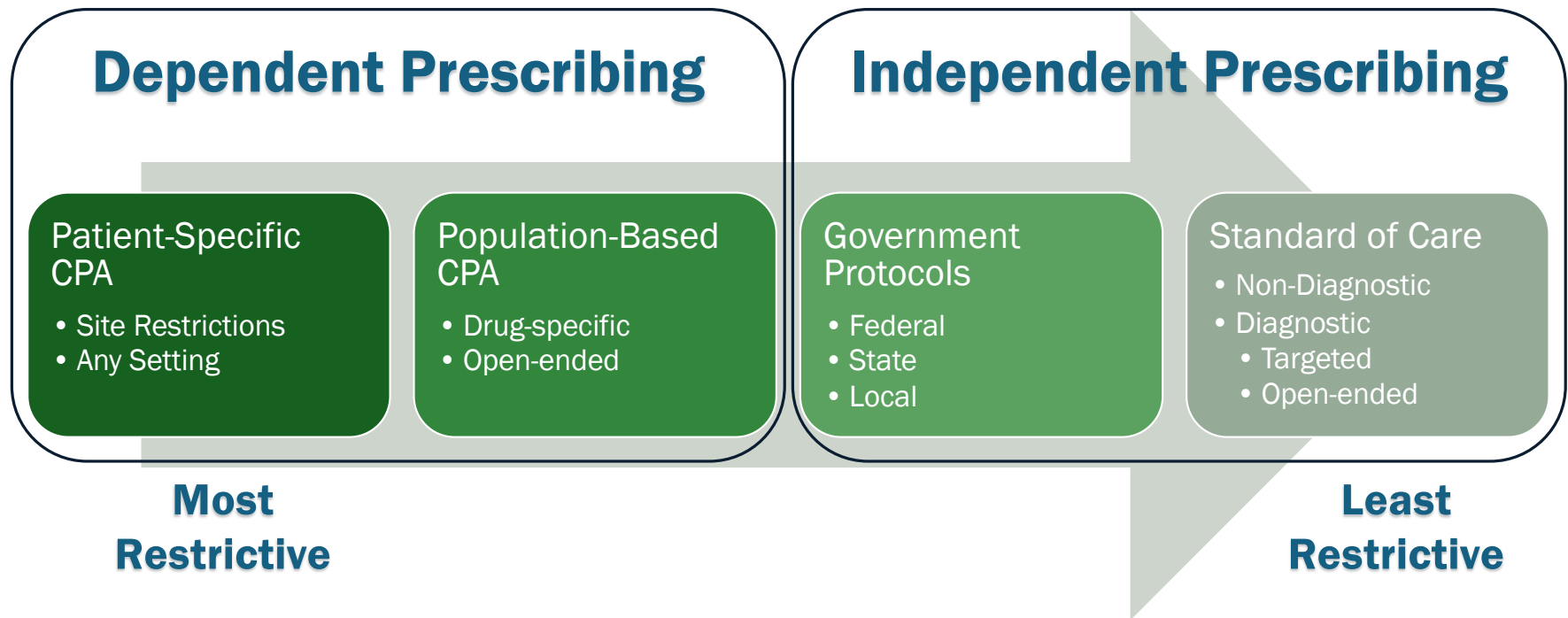
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# The Pharmacist Prescribing Continuum



# Questions Thank you

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