



February 25, 2025

The Honorable Susan Donovan  
Chair, House Committee on Health and Human Services  
82 Smith Street, Providence, RI 02903

**Re: ASHP Supports House Bill 5353**

Dear Chair Donovan and Members of the Health and Human Services Committee,

The American Society of Health-System Pharmacists (ASHP) strongly **supports House Bill 5353**. This bill will authorize a pharmacy technician or pharmacy intern to perform technology-assisted dispensing process validation for medications prepared for distribution by another pharmacy technician or intern within an institutional pharmacy.

ASHP is the largest association of pharmacy professionals in the United States, representing 60,000 pharmacists, student pharmacists, and pharmacy technicians in all patient care settings, including hospitals, ambulatory clinics, and health-system community pharmacies. For over 80 years, ASHP has championed innovation in pharmacy practice, advanced education and professional development, and served as a steadfast advocate for members and patients.

**What is 'dispensing process validation'?**

After a prescription or order information is entered into a pharmacy's electronic system or electronic health record and reviewed by a pharmacist for clinical appropriateness and accuracy, a final physical verification ensures that the drug and drug dosage, device or product selected from a pharmacy's inventory pursuant to the electronic system entry is the correct drug and drug dosage, device, or product.

**Why is this legislation necessary?**

Rhode Island pharmacy technicians are currently prohibited from engaging in dispensing process validation. This means that a pharmacist must personally perform a final physical inspection before any medication may be transferred out of the pharmacy. In institutional settings, this often results in pharmacists dedicating significant time to engaging in physical verification tasks that do involve clinical judgment and reduce pharmacists' overall ability to engage in clinical patient care activities.

**Technician dispensing process validation is safe and effective.**

Studies consistently demonstrate technician dispensing process validation does not produce higher error rates than pharmacist verification.<sup>1</sup> Barcode technology is commonly utilized in product verification to

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<sup>1</sup> Alex J. Adams, Steven J. Martin, Samuel F. Stolpe, "Tech-check-tech": A review of the evidence on its safety and benefits, *American Journal of Health-System Pharmacy*, Volume 68, Issue 19, 1 October 2011, Pages 1824–1833, <https://doi.org/10.2146/ajhp110022>

ensure that patient's "five rights," the right patient, the right medication, the right dose, the right route, and the right time, are maintained at all times. Surveys estimate more than 80 percent of hospital pharmacies utilize barcodes for restocking automated dispensing cabinets.<sup>2</sup>

**Technician dispensing process validation benefits patients, pharmacists and pharmacy technicians.**

Technician dispensing process validation allows health system pharmacies to operate more efficiently, ensuring the appropriate medications reach patients in a timely manner. In addition to freeing up pharmacist time to engage in clinical activities, technician dispensing process validation creates additional opportunities for pharmacy technicians to develop specialized skills, advance their careers and expand their ability to positively impact patient care.

**ASHP urges you to vote 'YES' to H 5353 as it is currently written.** Thank you for the opportunity to testify in support of this bill. If you have any additional questions or would like further information please contact Kyle Robb ([krobb@ashp.org](mailto:krobb@ashp.org)).

Respectfully,



Kyle Robb, PharmD  
Director, State Policy & Advocacy  
American Society of Health-System Pharmacists

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<sup>2</sup> Craig A Pedersen, Philip J Schneider, Michael C Ganio, Douglas J Scheckelhoff, ASHP national survey of pharmacy practice in hospital settings: Dispensing and administration—2020, American Journal of HealthSystem Pharmacy, Volume 78, Issue 12, 15 June 2021, Pages 1074–1093, <https://doi.org/10.1093/ajhp/zxab120>

# 10 THINGS TO KNOW ABOUT TECHNICIAN PRODUCT VERIFICATION

Technician product verification allows pharmacy technicians to independently perform the technical tasks required for medication preparation and dispensing. Policies in support of pharmacy technician product verification enable pharmacists to spend more time on clinical and cognitive functions, streamline workflows, and create advanced opportunities for pharmacy technicians. Examples of pharmacy technician final verification include tech-check-tech, tech-check-technology, or technician-check-repackaging.

## 1 WHAT IS PRODUCT VERIFICATION IN A PHARMACY?



After a prescription or order information is entered into a pharmacy's electronic system or electronic health record and reviewed by a pharmacist for clinical appropriateness and accuracy, a final physical verification ensures that the drug and drug dosage, device or product selected from a pharmacy's inventory pursuant to the electronic system entry is the correct drug and drug dosage, device, or product.

## 2 WHAT IS TECHNICIAN PRODUCT VERIFICATION?

Verification of a technician's or technology order-filling accuracy by another technician rather than a pharmacist.

## 4 ARE ALL PHARMACY TECHNICIANS AUTHORIZED TO PERFORM PRODUCT VERIFICATION?

Not all states authorize pharmacy technicians to engage in product verification. In states where technician product verification is allowed, pharmacy technicians engaging in product verification must do so in accordance with rules outlined in state law and institutional policies.

## 3 WHAT ACTIVITIES DO TECHNICIANS PERFORM WHEN ENGAGED IN PRODUCT VERIFICATION?

- Identifying the right medication, right strength, and right dosage form was selected from the pharmacy's inventory or automated dispensing system.
- Calculating and verifying the correct quantity of medication was dispensed based on the prescription or order's dosage and frequency.
- Ensuring that the product is intact and within its expiration date.
- Reporting discrepancies to the supervising pharmacist.

## 5 WHAT TRAINING DOES A TECHNICIAN NEED TO PERFORM THIS ACTION?

- Individual states determine eligibility and requisite training for pharmacy technicians to perform product verification. Examples include didactic or equivalent training, pharmacy technician certification, and/or completion of an accredited pharmacy technician training program.
- In states where technician product verification is permitted but the state board of pharmacy does not directly oversee training of pharmacy technicians, individual institutions are required to ensure their programs are in compliance with the law.
- Some professional organizations offer certificates and/or specialized toolkits for pharmacy technician product verification.



## 6 WHAT DATA SUPPORTS PHARMACY TECHNICIAN PRODUCT VERIFICATION?

Studies have shown technician final product verification does not produce higher error rates than pharmacist verification (mean  $\pm$  S.D., 99.6%  $\pm$  0.55% versus 99.3%  $\pm$  0.68%, respectively)<sup>1</sup>.

## 7 WHAT TECHNOLOGY IS USED FOR PRODUCT PREPARATION AND VERIFICATION?

- a. Barcode technology is commonly utilized in product verification to ensure that patient's "five rights," the right patient, the right medication, the right dose, the right route, and the right time, are maintained at all times. Surveys estimate more than 80 percent of hospital pharmacies utilize barcodes for restocking automated dispensing cabinets.<sup>2</sup>
- b. Technology may be used to help fill prescriptions or medication orders within the pharmacy. Examples of this include the following:
  - i. Automatic medication counting systems
    1. Examples: VIVID ONE<sup>3</sup>, VIVID LITE<sup>3</sup>, RxSafe 1800<sup>4</sup>
  - ii. Automatic strip packaging machines
    1. Examples: RapidPakRx<sup>5</sup>, Parata ATP Pouch Packager<sup>6</sup>
  - iii. Medication carousels
    1. Examples: Omnicell Pharmacy Carousel<sup>7</sup>, RxSafe 1800<sup>4</sup>



## 8 WHAT IS THE PHARMACIST'S ROLE IN TECHNICIAN PRODUCT VERIFICATION?

- a. The pharmacist first receives and reviews a medication order or prescription. The pharmacist then performs prospective clinical review including indication, appropriateness of dose, route of administration, duration of therapy, patient allergies, drug interactions, and contraindications.
- b. Pharmacists supervise pharmacy technicians and technology associated with the medication preparation and distribution.

## 9 HOW DOES TECHNICIAN PRODUCT VERIFICATION BENEFIT PHARMACY TECHNICIANS?

- a. Involving pharmacy technicians in the product verification process allows for pharmacy technicians to advance their careers and expand their ability to positively impact patient care.
- b. Pharmacy technicians typically receive increased compensation whenever they assume an advanced role which may include certifications in chemotherapy, drug diversion, pharmacy informatics, and medication verification.<sup>8</sup>



## 10 WHO IS ACCOUNTABLE FOR ENSURING PATIENT SAFETY AND ACCURACY OF FINAL PRODUCT VERIFICATION?

- a. Pharmacy technicians and pharmacists are jointly responsible for maintaining an environment that emphasizes patient safety and striving for accuracy throughout the medication use process.
- b. Pharmacy technicians are responsible for understanding their institution's policies and procedures, following protocol, and reporting discrepancies to pharmacists.
- c. Pharmacists are responsible for supervision and oversight of all activities within the pharmacy.
- d. The pharmacist in charge and permit holder are jointly responsible for ensuring organizational practices comply with the law and do not lead to errors.

## REFERENCES

1. Alex J. Adams, Steven J. Martin, Samuel F. Stolpe, "Tech-check-tech": A review of the evidence on its safety and benefits, *American Journal of Health-System Pharmacy*, Volume 68, Issue 19, 1 October 2011, Pages 1824–1833, <https://doi.org/10.2146/ajhp110022>
2. Craig A Pedersen, Philip J Schneider, Michael C Ganio, Douglas J Scheckelhoff, ASHP national survey of pharmacy practice in hospital settings: Dispensing and administration—2020, *American Journal of Health-System Pharmacy*, Volume 78, Issue 12, 15 June 2021, Pages 1074–1093, <https://doi.org/10.1093/ajhp/zxab120>
3. Pill Counters. VIVID of Scientific Industries, Inc. Accessed 17 January 2024. Available from: <https://pillcounters.com/>
4. RxSafe 1800 w/ AWS. RxSafe, LLC. Accessed 17 January 2024. Available from: <https://rxsafe.com/solutions/rxsafe-1800/>
5. RapidPakRx Adherence Strip Packager. RxSafe, LLC. Accessed 17 January 2024. Available from: [https://rxsafe.com/solutions/rapidpakrx/?campaign=19946468573&content=654313788478&keyword=pharmacy%20automation&network=g&utm\\_source=adwords&utm\\_term=pharmacy%20automation&utm\\_campaign=RapidPakRx+-+Search&utm\\_medium=ppc&hsa\\_tgt=kwd-28186930&hsa\\_mt=b&hsa\\_net=adwords&hsa\\_src=g&hsa\\_ad=654313788478&hsa\\_acc=2814506818&hsa\\_cam=19946468573&hsa\\_ver=3&hsa\\_grp=147477149189&hsa\\_kw=pharmacy%20automation&qad\\_source=1&qclid=CjwKCAiAkp6tBhB5EiwANTCx1H4CyYzz4hFvs4m0dqvU\\_MqVUqiw\\_fdaFie5ADFinbldJVgE1eOgRoC3EQQAyD\\_BwE](https://rxsafe.com/solutions/rapidpakrx/?campaign=19946468573&content=654313788478&keyword=pharmacy%20automation&network=g&utm_source=adwords&utm_term=pharmacy%20automation&utm_campaign=RapidPakRx+-+Search&utm_medium=ppc&hsa_tgt=kwd-28186930&hsa_mt=b&hsa_net=adwords&hsa_src=g&hsa_ad=654313788478&hsa_acc=2814506818&hsa_cam=19946468573&hsa_ver=3&hsa_grp=147477149189&hsa_kw=pharmacy%20automation&qad_source=1&qclid=CjwKCAiAkp6tBhB5EiwANTCx1H4CyYzz4hFvs4m0dqvU_MqVUqiw_fdaFie5ADFinbldJVgE1eOgRoC3EQQAyD_BwE)
6. ATP Pouch Packaging Solutions. Parata Systems, LLC. Accessed 17 January 2024. Available from: <https://parata.com/solutions/adherence-packaging/atp-series-automation/>
7. Pharmacy Carousel. Omnicell. Accessed 17 January 2024. Available from: <https://www.omnicell.com/products/pharmacy-carousel>
8. Do Pharmacy Technicians Get Pay Raises? Barnes, Nichole. National Pharmacy Technician Association. Published 27 October 2021. Accessed 17 January 2024. Available from: <https://www.pharmacytechnician.org/NewsBot.asp?MODE=VIEW&ID=29148>



## **RI Farm Bureau Notes on Raw Milk for:**

### **House Health and Human Services Committee re: H 5354**

#### **Co-op Rules for Raw Milk (Licensed Dairy Farm to Licensed Processor only- to be pasteurized)**

- Federal inspection 1x year
- Co-op inspection 2x year
- State inspector 2x year
- Animal welfare inspections either every 1-3 years (federal program, must be a part of FARM (Farmers Assuring Responsible Management) to ship to a co-op in the US)
  - Yearly trainings.
  - SOPs for everything that could go wrong.
- Water tested annually by the state.
  - Co-op will take tests as needed.
- Must have a bulk tank and milk must be stored at 38 or below.
- Must sanitize equipment to high standards.
  - Checked when inspected.
  - Water must reach 165 when cleaning equipment.
- Milk sample taken from every shipment.

#### **CT State Regulations**

The sale of retail raw milk, and raw milk cheese manufactured from retail raw milk, is legal in Connecticut. Due to the risks associated with raw milk, the producing farms and manufacturing facilities must meet stricter product quality standards.

- Raw milk may be purchased at farms, dairy stores, and retail operations in CT.
- The Connecticut Department of Agriculture (DoAg) regulates the dairy industry in CT.
- Producers of raw milk and raw milk cheese (called retail raw milk and retail raw milk cheese) must register with the CT DoAg and obtain a permit to operate.
- The regulation states that the "Milk Regulation Board shall adopt regulations, in accordance with the provisions of chapter 54, establishing standards for sanitation, production, sale, labeling, handling and storage of retail raw milk and the manufacture of raw milk cheeses."
- Inspections are performed regularly and include, but are not limited to:
  - Quarterly pathogen testing for *Listeria monocytogenes*, *Salmonella species*, *E. coli* O157:H7, and *Campylobacter jejuni*.
  - Monthly tests are performed for coliform bacteria (indicators of fecal contamination) and other indicator bacteria to assess the biological quality of the milk.

- If coliform bacteria counts are greater than 150/ml, an immediate regulatory response will result; if greater than 50, but less than 150, a warning letter is given. If there is a second coliform count greater than 50 within 6 months, regulatory action will result.
- Herds shall be tested annually for brucellosis and tuberculosis.
- The milk ring test for the detection of *Brucella* spp. shall be administered monthly to each herd.

### **Mass Regulations**

- 330 CMR 27.00 establishes standards and sanitation requirements for raw milk and milk products for pasteurization, ultra pasteurization or aseptic processing and standards and sanitization requirements for raw milk for retail sale. This includes the following and more:
  - May only be sold on the farm where it was produced.
  - All sanitary containers shall be provided/supplied by the dairy.
  - State does TB and Brucellosis testing.
  - Milk ring test is done quarterly.
  - Water samples are required every 6 months.

The Massachusetts Department of Agricultural Resources (MDAR) is the main regulatory agency that governs the sales and distribution of raw milk. However, on the local level, towns and cities have the authority to enforce the policy.

All farmers selling raw milk must register with MDAR, regardless of the quantity sold. A "Dairy Farm Certificate of Registration" will be given to the farm as validation of compliance. Farms selling retail raw milk must also obtain a vendor's license from the nearest appointed milk inspector just like in the case of any dairy selling raw milk to pasteurization plants. MDAR keeps a close watch on the raw milk licensees, regularly inspecting the operations.

The farmer shall label the product "Raw cow's milk" or "Raw goat's milk" and the label shall include the name, address, and zip code of the producing farm. Farmers complying with MDAR regulations must have a label on all of their bottles reading "Raw milk is not pasteurized. Pasteurization destroys organisms that may be harmful to human health." A sign with this language must also be posted in the area where the milk is being sold. The FDA's position is that "Raw milk, no matter how carefully produced, may be unsafe.