

exit the business, problems with supply of compounded medicines could occur for patients in need.

Colorado

The Colorado State Board of Pharmacy recently enacted SB14-095: Pharmacies Compounding Drugs for Hospitals. Under the old law, a prescription drug outlet could only distribute compounded drugs for office use to physicians/practitioners who are authorized to prescribe drugs. The SB14-095 law allows prescription drug outlets to distribute compounded drugs to hospitals within the state of Colorado.¹⁹ There are limitations with this new law. In Colorado, the Department of Regulatory Agencies (DORA) is responsible for promulgating rules that limit the amount of drugs a prescription drug outlet can compound to a hospital. The limit under SB14-095 is to be no more than 10% of the total number of dosage units the prescription drug outlet dispenses on an annual basis.²⁰ In my opinion, I have mixed feelings on the dosage limit, but overall I believe this is a very good bill. Hospitals are looking to outsource more of their compounding medicines for inpatients to pharmacies specializing in compounding, and this increases the availability of options and supply for them.

Texas

The Texas State Board of Pharmacy (TSBP) has been active in doing its best to comply with the Drug Quality and Security Act. It regulates pharmacies compounding drugs under its TSBP Rule 291.133: Pharmacies Compounding Sterile Preparations. It extended its regulations through the enactment of TSBP Rule 291.76(d)(1)(L), which became effective August 31, 2014. Under this new rule, a pharmacy shall not compound sterile preparations unless the pharmacy has applied for and obtained a Class C-S license. Under this new license, pharmacies must register annually or biennially following the procedures specified in TSBP Rule 291.133, and must be inspected by TSBP prior to being issued a Class C-S license or renewing its license.²¹

Also, effective September 1, 2015, all personnel engaged in sterile compounding in any manner will need to have completed a single course, a minimum of 20 to 40 hours of instruction, from an accredited Council for Pharmacy Education approved provider, and completed a structured