

Pharmacy Technician Practice Act Reform



Expanding the technician roles is key to enhancing patient care, improving efficiency and addressing workforce challenges.

In 2015, Minnesota took a significant step by adjusting the pharmacy technician-to-pharmacist ratio from 2:1 to 3:1 plus 1 (with the plus 1 being an allowance for an additional certified technician, bringing it to 4:1 in some scenarios.)

This change nearly ten years ago aimed to enhance patient care and pharmacy operations. However, the landscape of the pharmacy practice has evolved considerably since then, necessitating a reevaluation of these ratios to align with current patient needs and modern pharmacy practices.

National Trends in Technician Ratios

A comparative look at other states reveals a trend toward more flexible ratios. As of recent data, at least 22 states, including Alaska, Arizona, and Illinois, have no mandated ratios, allowing pharmacies to determine staffing based on their specific needs and locations. States like Idaho and Colorado permit ratios as high as 6:1, recognizing the value of empowering pharmacies to make staffing decisions that best serve their communities.

The Evolving Role of Pharmacy Technicians

Pharmacy technicians today are entrusted with a broader range of responsibilities than they were a decade ago. Their roles have expanded from prescription processing to more advanced duties, including immunization support, point of care testing, patient education, and inventory and operations. This evolution coupled with changing technology allows pharmacists to focus more on clinical services, thereby improving patient outcomes. Restrictive technician-to-pharmacist ratios can hinder this progress by limiting the capacity of pharmacies to fully utilize their skilled workforce.

The goal is to ensure that pharmacy technicians can expand their work in the pharmacy by allowing them to vaccinate patients, complete medication histories, and other advanced tasks. This can be achieved by having technicians complete board-approved training programs and/or credentialing beyond national certification. Data shows there is no difference in errors when technicians complete these advanced activities. This change will also allow pharmacists to dedicate more time for direct patient care. Technicians would also be able to perform health screenings which can help increase public health. In states that do have expanded technician roles, like Wisconsin, Illinois, and Iowa, there is also improved job satisfaction and retention within technicians.

Lowering the age requirement for technicians to the age of 16 can help with the pool of availability for technicians and can help younger members of the workforce develop skills for the future. There is also the benefit of further career exploration in health sciences.

Given the significant advancements in pharmacy practice and the proven success of more flexible ratios in other states, it's time for Minnesota to consider expanding its pharmacy technician capabilities.