



Indiana Professional Licensing Agency  
Attn: Board of Pharmacy  
402 West Washington Street, W072  
Indianapolis, Indiana 46204

Dear Board of Pharmacy,

Our organizations represent 8,500 physicians and 7,500 pharmacists across the state. We are reaching out to suggest that the Board of Pharmacy take action on two issues outlined below.

First, we ask that 856 IAC 1-32-2(d) be suspended for the duration of the COVID-19 public health emergency in Indiana. The federal Drug Enforcement Administration (DEA) has invoked the “public health emergency exception” under the federal Controlled Substances Act, making it possible under federal law for practitioners to prescribe controlled substances through telemedicine without a prior in-person visit. Our organizations have each asked the Governor to loosen Indiana’s telemedicine law to allow providers to treat patients remotely as much as possible to protect their patients from possible exposure to COVID-19. Part of this request has been to waive restrictions on prescribing controlled substances through telemedicine in Indiana Code 25-1-9.5-8 to align with the aforementioned action taken by the DEA. In light of the anticipated increase in e-prescribing of controlled substances that may occur as a result of the increased use of telemedicine, we believe it is prudent to allow pharmacies to transfer unfilled prescriptions for all controlled substances, including Schedule II controlled substances. This aligns with DEA policy published in the preamble of the notice of proposed rulemaking (NPRM) on Electronic Prescribing of Controlled Substances (EPCS) 73 FR 36722, and the preamble of the interim final rule (IFR) on EPCS, 75 FR 16235.

Second, we respectfully request the Board of Pharmacy take steps to ensure current supplies of chloroquine (Aralen), hydroxychloroquine (Plaquenil), and azithromycin (Zithromax) are reserved for patients taking them for indicated uses. These substances have been used to treat patients with COVID-19 symptoms. However, some prescribers across the country have begun to prescribe it as a prophylactic, putting a strain on the supply. As a result, hospitals, pharmacies and patients are facing shortages. Several states, including Idaho, Nevada, North Carolina, Ohio, and Texas adopted emergency rules

to restrict access. Other state licensing boards, such as Washington, Kansas, and Missouri have issued statements against stockpiling the medications, advising that the drugs should be used for *treatment* rather than prevention. Therefore, we recommend the Board of Pharmacy take action to ensure the supply of these therapies is used for symptomatic patients and not as a prophylactic.

Thank you for your consideration of these requests. Please do not hesitate to contact any of us with questions or additional comments. We stand ready to assist with these efforts in any way possible and are committed to protecting our patients from COVID-19.

Sincerely,

Lisa Hatcher, MD  
President  
Indiana State Medical Association

Denise Fields, PharmD, BC-ADM, FASHP  
President  
Indiana Pharmacists Association, Inc.