WHAT DRIVES PHARMACY TECHNICIANS TO STAY IN A JOB?

Midyear COVID-19 Update
Best Practices to Hire Staff
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Notable Drug Interactions

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WHAT DRIVES PHARMACY TECHNICIANS TO STAY IN A JOB?
Dear NPTA Member,

I’m excited to announce that the National Pharmacy Technician Association has established a strategic alliance and media partnership with *Drug Topics*®. This partnership will allow NPTA to expand our reach as the leading voice for pharmacy technicians through the oldest and most recognized national news and information platform in pharmacy.

*Drug Topics*® has a rich heritage in serving pharmacists with dependable, peer-to-peer insights on both the latest opportunities and challenges in pharmacy practice and NPTA is excited to help extend their focus and impact to pharmacy technicians.

We are also delighted to be able to feature articles contributed by our members within *Drug Topics*® and across their various media platforms, as this provides a great opportunity for pharmacy technicians to be recognized as nationally published authors.

Our members are featured throughout this issue. On page 2, Savannah Nazarek, CPhT covers the connection between technicians and the #PizzaIsNotWorking movement. On page 4, Wesley Usyak, CPhT, M.Ed covers drug interactions that pharmacy technicians should know about. On page 10, you can learn six ways to increase your accuracy as a pharmacy technician from Marisa Doan, CPhT. On page 11, you can learn about eight unique career path options for technicians from HeatherLyn Gray, CPhT. And on page 15, Kourtney Mims, CPhT and Keona Owens, CPhT outline the differences between licensure, registration, and certification.

Going forward, be on the lookout for a quarterly message from NPTA along with your special issue of *Drug Topics*®. You’ll also be receiving special e-newsletters featuring additional educational opportunities and updates.

Finally, if there are any stories you’d to see in *Drug Topics*®—perhaps a story you yourself want to write—that the *Drug Topics*® editorial team should consider covering, please email those ideas to *Drug Topics*® Managing Editor Lauren Biscaldi at editors@drugtopics.com.

Enjoy your issue!

Mike Johnston, CPhT-Adv
Founder & CEO, NPTA
Pharmacy Technicians and the #PizzalsNotWorking Movement

Pharmacy staff are not motivated by an occasional pizza.

By Savannah Nazarek, CPhT

The burnout rate in the pharmacy is extremely high. If you are experiencing burnout in your position and need some tips on how to deal with what it does to you, read our blog article titled “How to Avoid Burnout” or the cover story of our 2021 September-October issue of CPhT CONNECT, “Letting Go of Burnout & Cultivating Joy.”

We also have a 2-part interview with Bled Tanoe, PharmD, discussing the #PizzalsNotWorking movement. In this podcast episode, Tanoe explains how the movement started and her ultimate goal in creating it.

The role of a pharmacy technician has changed substantially over the past few decades. In the past, technicians were considered the “clerks” of the pharmacy as they greeted patients and took care of them at the checkout.

Today, pharmacy technicians have increased responsibilities, including entering data, filling orders, and taking care of insurance issues. The pharmacy technician role has slowly evolved to mirror a pharmacist role without the need for a formal doctor of pharmacy education. In certain states, technicians must be licensed and/or hold a pharmacy technician certification. And if desired, they can increase their work responsibilities or specialize with one of the numerous certifications available.

Over the past several years, many issues have emerged with the increase in pharmacy technician responsibilities and the requirements demanded. These have been defined more recently because of the COVID-19 pandemic.

WHAT IS THE #PizzalsNotWorking MOVEMENT?

#PizzalsNotWorking is a catchphrase to show that pharmacy staff are not motivated by an occasional pizza. The movement was started by Bled Tanoe, PharmD, and has since caught fire across social media, highlighting a significant issue. In the pharmacy profession, we are health care providers whom many patients see regularly, some as often as weekly. Keeping up with our workflow, corporate metrics, and the needs of our patients can become very overwhelming at times.

Throughout the COVID-19 pandemic, so much has changed in the pharmacy profession, especially with billing procedures, medications, and protocols for vaccines and COVID-19 tests. Due to these changes and an increase in volume, pharmacies nationwide are experiencing a shortage of pharmacy technicians. This is primarily due to burnout and the current increase in wages in much lower-stress jobs.

WHY DOES THIS APPLY TO US?

This movement applies to us because it is about us. Tanoe started this movement to get the word out about how pharmacy staff are treated behind the scenes.

As mentioned before, burnout is a significant cause of the decrease in pharmacy staff. Technicians carry a huge responsibility while working in a pharmacy setting, and of all allied health professionals, are paid the least for their work.

WHAT CAN YOU DO?

Pharmacy technicians can do numerous things. Starting with burnout, put yourself and your needs first. Take care of yourself and take some well-deserved time off, if needed.

As a profession, pharmacy technicians have worked hard over the past 2-plus years, and do not get the credit they deserve. Speak up about issues and let the management team know what is going on in the pharmacy. Many times, metrics can be adjusted. I witnessed this at my former high-traffic store; work was lifted off our shoulders because we spoke up about our issues. Many things have changed; corporate became involved and gave them the help they needed, and things are running smoothly and efficiently now. Nothing can truly change unless it is brought to the attention of someone who can fix it.

And finally, spread the word. #PizzalsNotWorking was meant to explain to those not in the pharmacy profession what we go through “behind closed doors.” It is a topic that should be talked about. Bringing awareness to this movement will jump-start a change in the pharmacy profession and improve things for us in the long run.

Savannah Nazarek, CPhT is a certified pharmacy technician with 6 years experience in chain and community pharmacy. She currently works at Rite Aid in Pennsylvania.
Drug Interactions Pharmacy Technicians Should Know

Blood thinners, NSAIDS, and antiarrhythmics can interact and affect patients’ health  By Wesley Usyak, CPhT, MEd

Will I ever get a break? Why do some patients think that in a retail pharmacy environment all we do is slap a label on something as if we are a fast-food chain?

Pharmacy technicians have a key role in the prescription process. In a retail environment, technicians are usually the first person a customer will see. In a hospital environment, they have to prepare an intravenous or injection prescription order within minutes.

One important element a technician needs to consider is that drug interactions, if not handled correctly, can be detrimental to a patient’s health. One might question, “Isn’t this the role of a pharmacist and not a pharmacy technician?” No, not necessarily.

In many states, pharmacy technicians perform drug utilization reviews before a pharmacist performs verification. Therefore, a technician should be familiar with some of the more common drug-drug interactions.

For example, a pharmacy technician should know that if a prescription is presented for a blood thinner such as warfarin (Coumadin) or heparin, the drug will likely interact with other medications. One common drug interaction for warfarin is with aspirin or other nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Motrin) or naproxen (Aleve), which may cause increased bleeding. Other common drugs that interact with warfarin and heparin are antihistamines and tetracyclines, which can cause decreased coagulation. It is important to monitor a patient’s therapy regimen—and not only the prescription drugs, but also OTC NSAIDs such as the ones mentioned.

Another common drug interaction to be aware of is between angiotensin-converting enzyme (ACE) inhibitors such as lisinopril or quinapril (Accupril) and potassium supplements. ACE inhibitors work to control blood pressure and treat heart failure and can help in the early stages of kidney disease. Potassium supplements are taken to increase potassium levels in the blood. If taken together, they can lead to electrolyte imbalance and hyperkalemia.

Pharmacy technicians should also be cautious when a patient is receiving blood pressure medications and electrolyte supplements.

One final common drug interaction is between amiodarone and digoxin. These drugs are antiarrhythmics and treat conditions such as irregular heart rhythms and heart failure. Taking these drugs together can lead to digoxin toxicity and cause a patient’s heart rhythm to be fatal. Pharmacy technicians should ensure the pharmacist is aware of, and monitoring, the toxicity of these drugs.

The pharmacy technician plays a vital role in the prescription process. They need to ensure they understand each drug’s importance and any possible interactions that could occur. The pharmacist has the last call on verifying products as they are dispensed in either a retail or hospital pharmacy; however, a pharmacy technician can alert a pharmacist to a potential interaction that may have been overlooked.

Always remember: your role as a pharmacy technician is just as important as that of a pharmacist in understanding a patient’s drug therapy regimen and avoiding common interactions.

Wesley Usyak, CPhT, MEd, has been a pharmacy technician for more than 20 years. He is a program coordinator and clinical senior instructor at Idaho State University College of Technology and has spent the last 15 years teaching and training pharmacy technicians.

For references, visit drugtopics.com.
COVID-19 Vaccines Progress, but Pharmacists Remain Concerned About Access

To date, pharmacists and pharmacy staff have administered more than 250 million COVID-19 vaccinations, making pharmacies essential to the COVID-19 vaccination process. By Christine Blank

As the FDA has expanded emergency use authorization (EUA) of Moderna and Pfizer-BioNTech’s COVID-19 vaccines for children 6 months and older, pharmacy organizations are concerned about several issues surrounding vaccination in general.

Perhaps most pressing, pharmacies may not be able to continue administering vaccines if they do not receive formal clarification from the US Department of Health and Human Services (HHS) on the potential expiration of pharmacy personnel flexibilities granted during the COVID-19 pandemic.

“Clarification from HHS that pharmacy personnel flexibilities granted through the PREP [Public Readiness and Emergency Preparedness] Act will remain in place through October 1, 2024, as established for other healthcare providers, is essential for effective, proactive community planning and to support certainty for public access,” read a letter penned by 94 pharmacy organizations—including the National Association of Chain Drug Stores (NACDS), the American Pharmacists Association (APhA), and the National Community Pharmacists Association (NCPA)—to Department of Health and Human Services Secretary Xavier Becerra. “Current and ongoing ambiguities leave pharmacy personnel, their community and public health partners, and the American people they serve in an untenable position.”

A poll conducted by Morning Consult and commissioned by NACDS found that 70% of Americans support extending the policies that have allowed them to access essential services from their pharmacies during the pandemic, NACDS said in a news release. “[T]hose who received a COVID-19 vaccination from a pharmacist or pharmacy staff in a pharmacy are even more supportive: 85% support extending these policies.”

Pharmacists and pharmacy staff are essential to providing COVID-19 vaccines and testing, as they have administered more than 250 million COVID-19 vaccinations to date, NACDS noted. Approximately 2 of every 3 COVID-19 vaccine doses are administered at a pharmacy.

Another major concern is that funds for the uninsured for COVID-19 testing, treatment, and vaccinations need to be replenished via the Health Resources and Services Administration (HRSA) COVID-19 Uninsured Relief Fund, APhA, NACDS, and several other pharmacy and health organizations said in a letter to congressional leaders.

“The COVID-19 Uninsured Relief Fund ensures access to needed services without cost-sharing—as Congress has long promised—and without it, many of our nation’s most vulnerable communities may lose access to testing, treatments and vaccinations, placing themselves and others at risk of infection,” the groups wrote. “What’s more, without assurances to replenish funding, providers across the country are left without recourse to handle the influx of demand from uninsured Americans, forcing them to make decisions about the long-term sustainability of providing COVID-19 tests and services.”

“The money dried up for pharmacies to buy vaccines for the uninsured population, and we haven’t heard any discussion for correcting that,” Kurt Proctor, PhD, RPh, senior vice president of strategic initiatives for NCPA, told Drug Topics®. “It certainly would be a sad state of affairs if folks are not covering uninsured [patients] like they were. If there is a booster recommended in the fall and there is no coverage, that’s a problem.”

And while the federal Test to Treat program has “greatly improved provider access,” there are still many medically underserved areas with limited provider availability, Michael Ganio, PharmD, senior director of pharmacy practice and quality for the American Society of Health-System Pharmacists (ASHP), told Drug Topics®.

“There are also some clinicians still reluctant to prescribe oral antivirals because of concerns with drug interactions or because of unfamiliarity with treatment guidelines and the role of...
these agents. Pharmacists are well positioned to fill these gaps, but we are limited by the restrictions in the EUAs of the antivirals preventing pharmacists from prescribing,” Ganio said.

PHARMACIES PREPARE FOR PEDIATRIC VACCINATIONS

More than 40% of children aged 5 to 11 years who received a COVID-19 vaccination did so at a pharmacy, according to NACDS, and pharmacies are preparing to administer even more doses following the FDA and CDC sign-off on the Moderna and Pfizer-BioNTech COVID-19 vaccines for children as young as 6 months in mid-June.

The FDA amended the Moderna EUA to include individuals aged 6 months through 17 years; it had previously been authorized for adults 18 years and older. The Pfizer-BioNTech EUA was amended to include individuals aged 6 months through 4 years, updating the previous EUA for use in individuals age 5 years and older.

“Pharmacies remain the accessible, go-to solution for vaccinations. This has been the case throughout the COVID-19 pandemic, and has remained the case for boosters, additional doses, and as more populations have become eligible for the vaccines,” Ganio said. “Extensive efforts are already underway at NACDS member companies to ensure that pharmacy teams are well aware of CDC’s updated recommendations and guidance—as well as clinical and operational guidelines.”

Not all pharmacies will be administering vaccines to the youngest age group, as the PREP Act covers individuals only as young as 3 years. For those younger than 3 years, each state law differs with some allowing pharmacies to administer while others do not, Proctor noted.

Proctor cautioned pharmacies to watch out for differences in vaccines of those 6 months and older. “They come in their own vials; it will be very important that folks will be getting the right vials for the right patient and using the right product,” he advised.

The COVID-19 vaccines that were provided to pharmacies earlier this year have labels and fact sheets that may be inconsistent with new FDA wording for the EUA for the youngest age groups, Proctor added. “Everybody needs to make sure they are following the latest manufacturer fact sheet.”

REFERENCES


How to Hire Staff During the Great Resignation

Practices can use these strategies to attract skilled workers to open positions. By Aine Cryts

Low pay, no opportunities for advancement and feeling disrespected at work: Those are the three top reasons American workers said “I quit” during the “Great Resignation,” according to a Pew survey conducted in March 2022. Other experts have referred to this wave of resignations, which rose to a 20-year high in November 2021, as the “Great Reshuffling,” indicating that these workers simply chose better jobs.

While health care providers more likely to stick around, your front desk staffer may have one foot out the door. Experts provide a wealth of advice to hire and retain employees—including offering salaries that compete with local retailers, conducting “stay interviews” and offering 4-day work weeks.

Chris Garofalo, MD, a physician in North Attleboro, Massachusetts, agreed that this is one of the most challenging hiring environments he has faced. “There are people who are looking for more flexibility....Most people don’t want to go back to the office full time, but they don’t necessarily want to stay home full time either.”

Still, one of the issues when providing health care is that it’s difficult to have people working from home. “We need to take care of our patients in the office setting,” said Garofalo.

He addresses employees’ need for flexibility by letting them take a half a day if they’re sick or want to go to their child’s soccer game. “Most of the time we can accommodate that. They don’t necessarily need to take it as sick time. If someone needs to go, we will deal with it later.”

HIRING STRATEGIES FOR STAFF
Seeking candidates to fill staff roles is never easy. According to Garofalo, online job boards can be hit or miss. “About 60% to 70% of the people who respond and make an appointment for an interview no-show the interview. Of the people who show up, 30% to 40% don’t have the qualification [we are looking for], and we can’t train on the job,” he said.

Recently, Garofalo needed to hire a medical assistant at his practice so he posted the job opening on Everything North Attleboro, a Facebook group for the community. “My thought was this was more local,” he said. “It’s not just people who are going to apply generally to job postings. I put a more personal touch, and we got some really good responses. That’s how we hired our most recent medical assistant, who has 15 years of experience.”

For pharmacy owners seeking their own staff, turning to Facebook may be an effective strategy. Another option is to actively recruit employees who want to work as part-timers, according to Andy Swanson, CMPE, vice president of industry insights at Medical Group Management Association (MGMA). “Practices have gotten better at flexible staffing in the last 10 to 15 years,” he said.

Swanson expects that many of the people who recently left jobs will run out of money and need to pursue part-time work. At a pharmacy or other provider’s office, that could look like a 9 a.m.-to-2 p.m. shift 3 days a week for one staffer, with another team member taking that shift the other 2 days.

“Not everyone wants full-time work....Maybe they don’t want to stop driving for Uber, or they want something while the kids are in preschool,” he said. Another benefit of this flexible staffing model: owners can save money that would have spent on health insurance and other benefits, added Swanson.

HIRING AND RETENTION STRATEGIES
The average hourly rate for a Target employee in Sunnyvale, California, is $21.80, while a Target employee in Washington, DC, earns $20.24 an hour, according to San Francisco-based Zippia, which tracks salary information for job seekers.

But understanding the local labor market is one area where health care practices frequently fall short, said Swanson. “You’re competing with fast food services and retail. That means your pay has to be at or above [those workplaces], and you can’t pay the median rate of $18 an hour that MGMA says you should pay for your state or region.”

His advice: “You need to mind-shift and benchmark pay rates to your market,
not just to the national average.”

Jennifer Brull, MD, FAAFP, a family medicine physician in Plainville, Kansas, doesn’t have to compete with Target’s hourly rate because the retailer is a 2-hour drive from her practice. But she can offer her front desk staff some lifestyle benefits that are tough to beat: Minimal physical labor is required and the outpatient practice doesn’t require staff to work evening or weekend hours.

It’s just as important to create a work environment where employees want to stay. Many among Brull’s team have remained at the practice for 10 to 25 years. “We have a reputation for being a culturally good place [to work] where people care about you....If you need to be out for a family event, you can do that. You have health care coverage as a benefit. That’s how we try to make ourselves attractive as an employer.”

Hiring and Retention Strategies for Clinical Staff

In addition to hiring and retaining an administrative team, health care practices have to recruit and retain clinical staff. In physician offices, 28% of health care leaders reported losing a physician to an unexpected retirement, according to a March 2021 poll by MGMA. Meanwhile, the US Bureau of Labor Statistics projects 9% employment growth for RNs from 2020 to 2030; the fastest growth is expected for nurses in outpatient settings. In the pharmacy sector, employment is projected to decline 2% during this same time period, although it is also expected that there will be approximately 11,300 job openings for pharmacists stemming from a need to replace workers who leave the industry or retire.

As Brull works to recruit new clinical staff, there are 2 selling points she’s leaning into: The practice is in a rural area with low crime and a good education system, and those who choose to practice in the area for 4 years can have their medical school tuition refunded.

“I grew up in this part of the state,” said Brull, who has practiced medicine in the Plainville area for 20 years. “I moved to the big city for 10 years for training and then I moved back. The only things I miss are the shopping and the food. Now there’s online shopping, which means I only miss the food. And my husband is a great cook.”

Tom Florence, executive vice president of recruiting at Merritt Hawkins, said the company’s recruiting business has seen “a tremendous uptick in demand.” Although Merritt Hawkins specializes in recruiting and placing physicians, the tips Florence provided can be applied by any pharmacy owner looking to bring on new clinical staff.

Over the years, workplace conditions for pharmacists have gotten worse—and that’s before the stress and burnout from the COVID-19 pandemic is factored in.

When Florence coaches hiring managers, he suggests that they start with a market analysis, much the same way a real estate agent does with a property that comes on the market.

“You want to make sure that the opportunity provided is viable compared to other roles,” he explained, which includes taking the time to look at compensation for pharmacists in other geographic areas. “If we can’t find a candidate locally, that’s now a national search,” he said.

Beyond salary, flexibility is critical, according to Florence. “Anytime you can give them set hours or set schedules, they really appreciate that. Four-day work weeks—that’s an opportunity that
stands out as well.”

Still, Florence encourages owners and hiring managers to consistently check in to see how staff is doing. “Some companies do exit interviews. I encourage clients to do ‘stay interviews.’ ”

Professional information services company Wolters Kluwer also offers advice on recruiting health care providers, including the following tips:

- Emphasize career advancement by offering new-graduate residency programs and transition-to-practice programs to attract new talent.
- Focus on work-life balance, not just the job.
- Compensate appropriately, realizing that tuition reimbursement and loan repayment programs are attractive perks.
- Offer flexible schedules, which will may help with work-life balance.
- Cultivate a slate of ambassadors who can connect emotionally with their peers in video testimonials.
- Create a sense of community where nurses feel they have a voice.
- Build and sustain a ‘kind culture’

Garofalo is candid about his practice’s inability to compete with larger practices or hospitals that can pay employees more. His strategy: Build and sustain a “kind culture.” For him that means letting an employee leave for the day if their child is sick and backing up an employee if a patient treats them rudely.

Building and sustaining a culture where employees want to work “starts at the top,” said Garofalo. “It starts with the owner and our manager. I think we have to model that kind of behavior....We are very protective of our employees. We certainly have had episodes where patients were getting very upset [at employees]. We aren’t afraid to step into that, rather than just delegating to our employees.”

“It’s important for employees to know we have their backs and we’re there to support them,” added Garofalo.

Here’s some language he has used with a patient who had treated a staffer poorly: “You don’t get to treat employees one way and me another way. You can’t be all ‘nicy nice’ with me [and rude to staff].”

Getting the workplace culture right seems to work as a retention tool, he said. “Over the past 4 years, we have had 3 people leave who came back. They got more money elsewhere, but they came back here to get paid less. But we provide a better atmosphere for people.”

Successfully navigating conflict among employees also helps, advised Garofalo. His approach to building a “family-type” atmosphere at the practice is twofold. The practice is very careful to ensure the people it hires are a good fit and, he says: “We really try to keep drama to a minimum...We have our HR person who has no problem addressing it. We make sure that people understand what behaviors will and won’t be tolerated.”

Swanson advises providers to think long and hard about the employee value proposition. “That outlines a handful of key drivers in which employees find value, for example, pay, benefits, and vacation, in addition to the career benefit, learning and development, and flexibility with the ability to work from home,” he said.

It can be as simple as leaders asking this question: “What are we going to offer on a spectrum of value creators?”

“We’re either going to pay you more...or offer flexibility or better hours. What can we do...to really stand out for the majority of candidates?” Those are the questions every practice leader should be asking, said Swanson.

“This article originally appeared in our sister publication, Medical Economics.”

For references, visit drugtopics.com.
Six Ways to Increase Your Accuracy as a Pharmacy Technician

Prioritization, time management, and hitting pause are some of the ways in which accuracy can be improved.

By Marisa Doan, CPhT

What is accuracy? Freedom from mistake or error. There are various ways to increase your accuracy as a pharmacy technician, and various websites to help you over time. As a certified pharmacy technician for over 11 years, I have had to learn different ways to increase my accuracy.

PRIORITIZE.

Those who know, know how it is being the opening technician. You sign into the system and you notice there are multiple prescriptions, customers waiting, and the phone is ringing off the hook. That is when you must decide on what needs to be done first. In my job, I would take care of the waiters first, then work down the list until I can get to a manageable point—or until help arrives, but in some cases, that might not always happen.

TIME MANAGEMENT.

Make sure you manage your time. Sometimes you may get caught up with a task, such as calling a patient’s insurance or trying to solve a problem, and time slips away. Trust me, I have been on that side before. If it’s something you know you can take care of quickly, then take care of it. However, if it’s something that will take a little time, set it aside and work on it later, especially if it’s not something that doesn’t need to be done immediately.

AVOID CLUTTER.

I always try to make sure I have a clean workspace, free of bottles, papers, and other clutter. Personally, I can’t function with a lot of stuff around me because I believe something will happen—for example, a misfill. I usually take the time to pick up and throw away what doesn’t need to be in my workspace. I also don’t do a pick list, because that causes clutter with medication everywhere. I usually take what I need off the shelf and put it back when I’m done to avoid any clutter.

PAUSE.

Sometimes as technicians, things can get very overwhelming, and you need a break. If you must pause for a minute or 2, please do. If I feel like I’m getting overwhelmed or stressed, I pause and take a break. I know that not everyone has this opportunity because the job of a technician is constant, but mentally, it is needed—even if you just stop, take a couple deep breaths, and get back to work.

SLOW DOWN.

When you are in the daily groove of filling and typing up prescriptions, you sometimes start to hurry and type the wrong medication or directions or put the prescription under the wrong patient profile. Take the time to slow down and look over everything. I have caught several occasions where someone copied sig and didn’t read through it, and it didn’t make any sense. Accuracy means a lot. After all, you run the risk of filling something wrong, entering something under the wrong patient, or possibly overdosing a child because you were in a hurry and didn’t slow down to make sure everything was correct.

WORKFLOW.

Make sure you have a good workflow, one where you and your coworkers work together to get a job done. This is one of the key elements that can make or break you. If you are working together as a team, things can go smoothly, but having that slacker in the group who refuses to do anything makes your day a lot harder.

I chose a personal approach for this piece. I’ve worked as a pharmacy technician for 11 years, and I constantly learn new things every day, including how to deal with day-to-day situations. Some work out for good and others don’t, but either way, I always tell myself, “I got this.” I have come too far to give up or to let things bother me.

Marisa Doan, CPhT, has been a pharmacy technician since 2010. She has worked for H-E-B since 2009 and previously, she taught pharmacy technician students at Lone Star College.
Eight Unique Career Options for Pharmacy Technicians

For some, their calling lies outside the 4 walls of a traditional retail pharmacy By HeatherLyn Gray, MPH, SCCEM, CHEC, CPhT

I wrote a blog post in February 2022 titled “How Pharmacy Technicians Do More Than Count Pills.” You may be thinking, “That’s great, but what if I don’t want to work in a hospital or retail?” Maybe you’re already working in those settings and need a change. Maybe hospitals creep you out. Perhaps you spent a summer as a salesclerk and vowed never to work in retail again.

I get it—and I’ve got you covered. Here are some unique career options that aren’t (always) in retail or hospital.

Maybe you like working with the community, but not with the whole community. (We see you, customer, who just dropped off a prescription and is now engaged in a 1-sided staring contest for entire the 30 minutes we quoted to get it filled.) Nontraditional or “closed door” pharmacies might be an option, such as long-term care, infusion centers, and veterinary clinics or hospitals. You still get to work with people (or puppies!), but in a specific environment, although I haven’t come across too many veterinary pharmacy technician positions.

Working in a mail-order pharmacy has the potential to eliminate nearly all awkward interactions with customers that might pop up in retail. For the most part, orders and refill requests come in via fax, mail, or telephone. They are then filled, boxed up, and sent out with the mail. You still need to communicate with customers, but they’re on your time now. For those looking into the future, the mail-order pharmacy market is expected to grow through 2027 as mail-order medications become more prevalent among adults in the United States.

Another pharmacy sector expecting continued growth is specialty pharmacy. Specialty pharmacy technicians work with medications treating rare or complex health conditions, such as cancer, rheumatoid arthritis, HIV/AIDS, and organ transplantations. Pharmacy technicians taking this career path may find job satisfaction working as part of a health care team because specialty pharmacies are often more involved in following up with patients and communicating with providers and caregivers to ensure treatment regimens are being followed correctly.

Working as a prior authorization technician might also be an option if you don’t mind being on the phone, wrangling necessary documentation from physician’s offices, and submitting prior authorizations to ensure patients can receive the medications they need with the least delay possible. For those driven by figuring out puzzles (because what is deciphering plan coverage policies to get insurance companies to pay for medications if not a series of puzzles), the path of prior authorizations might be the right one.

A position as a data analyst technician or pharmacy technician informaticist is an option for data-driven pharmacy technicians. Both paths focus on gathering and evaluating data to improve health outcomes: Data analyst technicians may be responsible for reviewing charts, financial data, quality improvement reports, and patient risk assessments to improve business operations and pharmacy processes, whereas pharmacy technician informaticists are the tech gurus, working with technology, management systems, and automation to optimize the delivery of pharmacy services.

For my fellow academics, a career in pharmaceutical research, working as part of a research and development team conducting drug studies, might be what

“Spoiler alert, [pharmaceutical research] is also an area of pharmacy expected to grow at least through 2025, with clinical trials in treatments for cancer, acute and chronic pain management, autoimmune diseases, diabetes, and cardiovascular diseases also projected to increase.
you’re looking for. And spoiler alert: This is also an area of pharmacy expected to grow at least through 2025, with clinical trials in treatments for cancer, acute and chronic pain management, autoimmune diseases, diabetes, and cardiovascular diseases also projected to increase.

Lastly, for the technician who’s done it all, consider the path of teaching. This is an opportunity to give back to the profession by training the next batch of technicians (the “right” way). If you have the experience and patience to teach, consider doing it.

So there it is: a list of pharmacy career paths you could go down that aren’t (necessarily) in retail or hospital. Some of these might find you working for a retail chain or health care system, but that job may be in an office building or somewhere else outside traditional pharmacy walls. Pharmacy is a big world with many paths to explore, so do it. Remember, not all who wander are lost.

Mike Johnston, CPhT-Adv, CEO and founder of the National Pharmacy Technician Association, has an incredible resource for finding these career options. His Ultimate Career Navigator Course provides 130 unique career path options for CPhTs. This 6-week course gives you the necessary steps that must be taken to achieve your professional goals, covering:

- How to craft your ideal career plan
- Dynamic job-search strategies
- Winning résumés and cover letters
- Attention-grabbing applications
- Unforgettable interviews
- Strategic offer evaluations and negotiations

Scan the QR code to gain access to this resource and take your career to the next level.

HeatherLyn Gray, MPH, SCCEM, CHEC, CPhT, is a nationally certified pharmacy technician with over 15 years of hospital experience. She is currently employed as an emergency management coordinator for Prisma Health.
Referring to pharmacy technicians as “heroes,” Walmart announced that the company is raising the wages of its 36,000-plus Walmart and Sam’s Club pharmacy technicians and is planning to hire approximately 5000 additional technicians this year.

“Our Walmart and Sam’s Club pharmacy technicians have proven time and time again how much they mean to the communities they serve. They were front and center during the pandemic as we tested millions of customers and members, and many went above and beyond to help administer vaccines across the country,” wrote Kevin Host, senior vice president (SVP) of Walmart Health & Wellness, Pharmacy, and Sean Jackson, SVP of Sam’s Club GMM, Health and Wellness/Consumables, in a Walmart news release.

“Simply put, our pharmacy technicians are heroes in their communities. They also play a critical, day-to-day role in the continued growth of our Health & Wellness business.”

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For the second time in the past year, Walmart is making “significant investments in higher wages and career progression for our pharmacy technicians, with a goal of creating additional pathways of growth and opportunity for them,” Host and Jackson noted.

Starting the week of June 13, Walmart and Sam’s Club increased pharmacy technicians’ average wage to more than $20 per hour, following a pay increase last August.

“That’s by design. We are sending a strong signal to pharmacy technicians everywhere that Walmart is serious about attracting top talent and giving them the tools to build a successful career,” Host and Jackson stated.

The 2 retail chains will also give technicians more frequent, automatic pay raises “as we introduce a new, progressive wage model designed to set us apart from the competition,” Host and Jackson emphasized in the release.

For example, new pharmacy technicians will be given raises that can add up to $4 to their starting base pay over the course of 4 years. Additionally, technicians will receive raises every 6 months during their first 2 years with the company.

“We believe we are among the first large retailers to incorporate this kind of model—an approach that’s commonly seen in health care systems. This will help associates increase their pay more quickly as they build their careers and continue working at Walmart,” Host and Jackson explained.

Sam’s Club and Walmart also plan to hire an additional 5000 techs this year “to support our vision of providing best-in-class health care,” Host and Jackson wrote. “Our business is growing, and we’ll continue to make investments across our entire Health & Wellness team to help drive that growth.”

In addition to raises, the retailers will pay for eligible associates to become certified pharmacy technicians through benefits like Live Better U and other related programs.

“Walmart certified technicians can make $3 more per hour than their non-certified peers, which means earning a certification can make a big difference for associates and their families,” Host and Jackson wrote. “To remove any roadblocks, Walmart covers the costs for getting certified to be a pharmacy technician—from career diplomas, on-the-job training and test prep, to paying the certification exam fee.”

For references, visit drugtopics.com.
What Drives Pharmacy Technicians to Stay in a Job?

A supportive environment and appropriate compensation contribute to pharmacy technicians staying in their current position. By Miranda Hester

The current labor shortage hasn’t bypassed pharmacies: Many report having difficulty filling available positions for pharmacy technicians. Retention and job satisfaction among pharmacy technicians has been studied infrequently. A poster presented by Victoria Kosinski, PharmD, of the West Virginia University Pharmacy Residency Program, at the 2022 American Society of Health-System Pharmacists Summer Meetings and Exhibition in Phoenix, Arizona, examined the factors that impact satisfaction and retention for technicians in a variety of areas of pharmacy practice.

A survey was made available to a virtual message board and to pharmacies via a link or QR code. The survey was intended for current pharmacy technicians 18 years and older who were registered with a state board of pharmacy. Technicians were asked about their satisfaction with their current position as well as the likelihood that they would remain in the position for 1 more and for 3 more years. Respondents were also asked about factors potentially affecting that likelihood, such as compensation, stress levels, staffing, and assigned tasks.

A total of 295 licensed pharmacy technicians from 28 states completed the survey. Of these, 60% were pharmacy technicians who currently worked in a hospital setting. Although 71% of the technicians said that they would likely still be in their position a year later, only 40% said that they would likely still be there in 3 years. The most important factors impacting this choice included advancement opportunities and compensation. The technicians reported that the top 3 reasons for which they would leave their current place of employment were those related to compensation, advancement opportunities, and stress levels.

The survey findings also indicated that a supportive environment and a level of compensation commensurate with their responsibilities were the top reasons that a technician would likely stay in their position. Kosinski said that further research should involve surveying technicians who are not registered with a pharmacy board, as well as those working in a wider range of practice settings, to create a fuller picture of retention and job satisfaction.

For references, visit drugtopics.com.
Demystifying the Differences Between Licensure, Registration, and Certification

Community colleges, online institutions, and employers all offer training for pharmacy technicians.

By Kortney Mims, BS, CPhT and Keona Owens, BA, CPhT

Some benefits of licensure and registration include prestige, improved career prospects and employability, enhancement of stature, authority, flexibility, higher earning potential, demonstration of a professional attitude valued by employers and customers, enhanced status leading to higher self-esteem, national recognition of competence and commitment, evidence of expertise, and greater influence within the industry.

Some benefits of certification include a competitive advantage, a boost in efficiency, higher earning potential, an increase in knowledge and skills, and professional credibility.

It’s likely we have all seen the terms licensure, registration, and certification before discovering our career pathways. If you’re unfamiliar with these terms, let’s use this opportunity to discover new words and their meanings: How does each term differ? How do employers recognize them? Let’s drive down the Word Bank Lane and discover the answers to these questions! And don’t worry, you won’t need any form of expertise to start this journey.

Licensure and registration are interchangeable. Both grant the authority or ability to practice a profession on a state level. Being licensed in a profession is an indication that you have the minimum competencies required to perform tasks related to that profession. This process is administered and monitored by a state-level authority and is required by law for regulatory purposes. Criteria for acquiring a license vary from state to state and typically do not authorize multi-state usage. Multi-state practitioners must submit an application for each state based upon state-level regulations.

Side Note: having a license in Florida does not grant you the authority to practice in California. To practice in California, a practitioner must register in that state.

Registration is required after meeting profession-specific criteria and completing the application process. Receive approval, pay fees, and the individual will be listed in a directory as an “active practitioner.” The criteria for professionals vary based upon state regulations. While submitting an application, you are required to provide proof of the completed coursework and/or degree program (that is, transcripts, diploma, and/or degree), completion of the practicum, successfully passing state board (requirements vary by state statute and profession) and national examination, and committing to the professional-specific standards. Registered professionals have achieved a level of mastery skills.

Side Note: Many professionals require the completion of state licensure/registration processes prior to granting the authority to practice or perform duties based upon the state-level regulation.

Certification is the process of receiving official documentation after completing coursework; training in a specific field; and successfully passing an examination; signifying status and a level of achievement. Wow, talk about success! In other words, you took an accredited program and passed an exam that exemplifies your expertise, knowledge, skillset, and capability to perform. Ultimately, this means cha-ching—professionally defined as increased income and potential sustainability. The certification process is typically administered by a non-governmental organization and is often recognized on a national level. If you move out of state, your certification goes with you.

Side Note: Having a certification will position you for vast opportunities, career growth. It shows employers that you’re an expert in your field of practice. And did I mention increased opportunities?! You get the picture...

While doing market research and determining your career pathway, it is crucial to consider these facts:
Knowing the difference between a professional certification and a certificate program. **Professional certification** is the process by which a person proves their knowledge, skills, and experience to perform duties. Typically, you receive a glorious piece of paper in the mail upon completion—Congratulations! You did it! This serves as proof that you have successfully passed the exams from an accredited organization or association (an assessment-based approach). But even better is after professional certification, you can officially use designations after your name, such as CPhT, CSPT, CPhT-Adv, or PMP, to recognize your level of expertise. You are now the expert.

What if you have completed a certificate program; isn’t that a professional certification? Although the terms are similar, they are not the same. According to the American Speech-Language-Hearing Association (ASHA) website, there has been an increase in certificate programs.\(^1\) A certificate program focuses on providing knowledge and skills on specialized topics. These courses tend to result from an educational process as opposed to an assessment process. Completion of this program awards a certificate to recognize mastery skills.

Is this a new field for you, or do you have relevant experiences? Professional certification typically requires previous skills and experiences in the topic, while a certificate program is tailored for any level of experience and education with a minimum requirement of a high school diploma or general educational development (GED). Professional registration can be a daunting task to complete and typically require some on-the-job experience.

**What level of commitment are you most comfortable with?**

Certifications require continuous education and training, known as continuing education units (CEUs) and/or on-the-job projects. These requirements must be completed within a designated timeframe.

**Is the certificate program accredited? Is the certification nationally recognized?**

Some programs are not nationally recognized.

**Side Note:** Avoid spending time, effort, and resources completing coursework/examinations that hold ABSOLUTELY no weight in your career pathway.

ASHA instructs us to do our due diligence, educate ourselves about programs of interest prior to committing, and be aware of certificate programs incorrectly labeled as certification programs.\(^2\)

Now, let’s shift gears and focus mainly on pharmacy technicians.

- Community colleges, online institutions, and employers all offer training for pharmacy technicians. Organizations like the National Pharmacy Technician Association (NPTA) and the National Healthcareer Association (NHA) offer national professional certification.

- A certified pharmacy technician is a competent, qualified individual who illustrates an exceptional level of expertise. During this voluntary process, a nongovernmental entity grants recognition and credentials, verifying a standardized exam.

- There is a vast array of educational options for your career. Whether or not your state requires licensure/registration and/or certification to practice, it is crucial to your career pathway to learn the difference between these options and their benefits. Map out your career and educational objectives and determine if these credentials are necessary on your journey.

<table>
<thead>
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<th>Licensed Pharmacy Technician</th>
<th>Registered Pharmacy Technician</th>
<th>Certified Pharmacy Technician</th>
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<tr>
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<td>Complete online application including all required information</td>
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<td>· Date and place of birth</td>
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<td>Attest to presently or previously attending and completing high school or a GED program</td>
<td>Attest to presently or previously attending and completing high school or a GED program</td>
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<td>At least 18 years of age</td>
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