# GEORGIA BOARD OF PHARMACY
# 2 MLK Jr. Drive, SE, 11th Floor, East Tower
# Atlanta, GA 30334
# December 13, 2023
# 9:00 a.m.

**The following Board members were present:**
Michael Azzolin, President
Chuck Page, Vice-President
Jim Bracewell
Michael Brinson
Young Chang
Cecil Cordle
Michael Farmer
Dean Stone

**Staff present:**
Eric Lacefield, Executive Director
Dennis Troughton, Director, GDNA
Michael Karnbach, Deputy Director, GDNA
Alec Mathis, Special Agent, GDNA
Max Changus, Senior Assistant Attorney General
Justin Cotton, Assistant Attorney General
Clint Joiner, Attorney
Brandi Howell, Business Support Analyst I

**Visitors:**
Jordan Khail, UGA
Jonathan Marquess, GPhA/AIP
Dawn Lieber-Sasine
Melissa Reybold, GPhA
Ben Cowart, Georgia Retailers Association
Derrick Lancaster, Cardinal Health NPHS
Becca Hallum, GHA
Scotty Green, Colquitt Regional Medical Center
Travis J. Cook, CAPS-Atlanta
Michelle Blalock, Cardinal Health
Olivia Buckner, Kaiser/St. Francis
Helen Sloat, Kaiser/Scion Health/HOG, PCOM
Brandon Brooks, Publix
Lauren Paul, CVS
Jennifer Duckett, Walgreens
Scott Tomerlin, Walgreens
Diane Sanders, Kaiser Permanente
Jansen Head, GMCC
Andrew Turnage, GMCC
Tracy Smith, Botanical Sciences
Gary Long, Botanical Sciences
Sam Dindoffer, Impact Public Affairs
Beth Jarrett, Walmart
Vance Wall, Advanced Medical Group LLC
Josh Mackey, Capital City Public Affairs

## Public Hearing

President Azzolin called the public hearing to order at 9:01 a.m.

President Azzolin stated that Mr. Joiner organized each rule based on the topic.

**Rule 480-1-.01 Organization of the Board, Rule 480-6-.01 Pharmacy Licenses, Rule 480-6-.02 Nonresident Pharmacy Permit, Rule 480-38-.04 Communications, Rule 480-40-.04 Witness Lists and Respondent Statements**

President Azzolin stated that the rule amendments were relative to an address change for the Board's administrative office.

No public comments or written responses were received.

Mr. Brinson made a motion to adopt Rule 480-1-.01 Organization of the Board, Rule 480-6-.01 Pharmacy Licenses, Rule 480-6-.02 Nonresident Pharmacy Permit, Rule 480-38-.04 Communications, Rule 480-40-.04 Witness Lists and Respondent Statements. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**Rule 480-7A-.06 Records and Recordkeeping; Reporting Requirements and Rule 480-19-.04 Record Keeping for Over-the-Counter (OTC) Sales of Exempt Schedule V Controlled Substance Drug Products Containing Pseudoephedrine**

President Azzolin stated that the rule amendments were relative to an address change for the Georgia Drugs and Narcotics Agency.

No public comments or written responses were received.

Mr. Bracewell made a motion to adopt Rule 480-7A-.06 Records and Recordkeeping; Reporting Requirements and Rule 480-19-.04 Record Keeping for Over-the-Counter (OTC) Sales of Exempt Schedule V Controlled Substance Drug Products Containing Pseudoephedrine. Mr. Cordle seconded, and the Board voted unanimously in favor of the motion.

**Rule 480-3-.03 Continuing Pharmacy Education, Rule 480-5-.04 Impaired Pharmacists, Interns and Externs, Rule 480-7-.05 Reverse Distributors, Rule 480-7A-.03. Restriction on the Distribution of Listed Chemicals, Rule 480-15-.02 Registration of Pharmacy Technicians and Continuing Education Requirements, Rule 480-22-.11 Transfer Between Pharmacies of Controlled Substance Prescription Drug Order Information for Refill Purposes, and Rule 480-33-.01 Definitions**

President Azzolin stated that the rule amendments were relative to spelling, grammar, punctuation, and/or formatting changes.

No public comments or written responses were received.

Mr. Farmer made a motion to adopt Rule 480-3-.03 Continuing Pharmacy Education, Rule 480-5-.04 Impaired Pharmacists, Interns and Externs, Rule 480-7-.05 Reverse Distributors, Rule 480-7A-.03. Restriction on the Distribution of Listed Chemicals, Rule 480-15-.02 Registration of Pharmacy Technicians and Continuing Education Requirements, Rule 480-22-.11 Transfer Between Pharmacies of Controlled Substance Prescription Drug Order Information for Refill Purposes, and Rule 480-33-.01 Definitions. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**Rule 480-34-.16 Naloxone Hydrochloride Nasal Spray**

No public comments or written responses were received.

Mr. Stone made a motion to adopt Rule 480-34-.16 Naloxone Hydrochloride Nasal Spray. Mr. Cordle seconded, and the Board voted unanimously in favor of the motion.

**Rule 480-6-.01 Pharmacy Licenses, Rule 480-6-.02 Nonresident Pharmacy Permit, Rule 480-7-.01 Manufacturer's Permit, Rule 480-7-.03 Drug Wholesale Distribution Licensing Requirements, Rule 480-7-.04 Researcher's Permit, Rule 480-7A-.04 Requirements for Licensure as a Listed Chemical Wholesale Distributor, Rule 480-7B-.02 DME Supplier Licensing Requirements, Rule 480-8-.02 Registration, Rule 480-10-.06 Licensure, Applications, and Display of License and Renewal, Certificate, Rule 480-13-.02 Licensure and Registration, Rule 480-18-.02 Licensure and Registration. Rule 480-33-.02 Licensure and Registration, and Rule 480-52-.07 Licensure, Applications, and Display of License and Renewal Certificate.**

President Azzolin stated that the rule amendments were relative to eliminating automatic nullification and voiding of a license in the event of a change of ownership.

No public comments were received. A written response was received from Becca Hallum, GHA, regarding Rule 480-6-.01 Pharmacy Licenses, Rule 480-10-.06 Licensure, Applications, and Display of License and Renewal, and Rule 480-13-.02 Licensure and Registration.

Mr. Bracewell made a motion to adopt Rule 480-6-.01 Pharmacy Licenses, Rule 480-6-.02 Nonresident Pharmacy Permit, Rule 480-7-.01 Manufacturer's Permit, Rule 480-7-.03 Drug Wholesale Distribution Licensing Requirements, Rule 480-7-.04 Researcher's Permit, Rule 480-7A-.04 Requirements for Licensure as a Listed Chemical Wholesale Distributor, Rule 480-7B-.02 DME Supplier Licensing Requirements, Rule 480-8-.02 Registration, Rule 480-10-.06 Licensure, Applications, and Display of License and Renewal, Certificate, Rule 480-13-.02 Licensure and Registration, Rule 480-18-.02 Licensure and Registration. Rule 480-33-.02 Licensure and Registration, and Rule 480-52-.07 Licensure, Applications, and Display of License and Renewal Certificate. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

The public hearing concluded at 9:06 a.m.

## Open Session

President Azzolin established that a quorum was present and called the meeting to order at 9:06 a.m.

**Appearance**

Mr. Scotty Green, Director of Pharmacy Services, Colquitt Regional Medical Center Pharmacy, met with the Board regarding his request for approval to proceed with the implementation of an Automated Medication System/Dispensing Machine (ADM) at Colquitt County Jail. Mr. Green stated that there was a recent inspection which noted a pyxis machine at the county jail. He further stated that the hospital employs all medical staff at the jail, which is four miles from the hospital. He added that Colquitt Regional Medical Center is under contract to provide correctional medicine services to the inmates of the facility and staff is granted the use of a secured area under direct camera surveillance within the jail for which to provide these services, which includes an office, exam room, and medication room. Currently, the jail is staffed by one nurse practitioner, three nurses, and a Medical Director. Mr. Green continued by stating the hospital pharmacists are basically treating the jail as another floor of the hospital. He stated that medications are kept in real time and are locked inside the pyxis machine, which can only be accessed when there is an order for a specific patient. Mr. Green stated that the agent had questions and concerns about operating that way because of the physical address. He requested the Board's approval to continue functioning in that capacity.

President Azzolin inquired as to who takes the medications to the pyxis machine. Mr. Green responded by stating that one of his registered technicians takes the medications. President Azzolin inquired if a provider was present when the technician takes the medications. Mr. Green responded by stating that a nurse practitioner was present. He added that the nurse practitioner has a physical key to access the machine and

the technician cannot get into the machine without the nurse practitioner present. Mr. Green provided the Board with a picture of what the room containing the pyxis machine looked like. He explained that the room was under 24/7 video surveillance.

President Azzolin inquired if the technician takes medications and puts them in the pyxis machine traditionally like at a hospital, for example. Mr. Green responded by stating that the only difference was they do not allow narcotics to be stored in the facility, and if they do have narcotics, it would be less than a seven day supply. He stated that they carefully manage those to make sure no diversion occurs. He further stated that it is the exact same process they would do at the hospital where they utilize barcode scanning. He added that it comes in unit dose packet form and the technician takes it to the jail. Mr. Green explained that everything is barcode scanned and there is no opened matrix drawer. He stated that the door cannot be opened and someone have access to ten medications. He added that there is no more than a month's supply at most of any medication.

President Azzolin inquired if the provider was taking ownership and signing for the drugs saying he/she is responsible for them when the technician takes the drugs and puts them in the pyxis. Mr. Green responded by stating the provider was not doing such; however, the medications were under the provider's purview at that point.

President Azzolin stated that at a previous meeting, the Board discussed three specific ways one could accomplish getting drugs to an offsite location. He stated that the first option involved having a clinic pharmacy license and a pharmacist designated as the PIC who would be responsible for that permit and be physically present to ensure those drugs are maintained according to clinic rules. President Azzolin stated the second option was to have the supplier directly send to the provider's location and the pharmacy is not involved at all. He added that the third option was for the pharmacy to provide the drugs, but the transfer of the drugs and the responsibility for them has to be the responsibility of the provider.

Director Troughton commented that the medications would need to be the responsibility of the provider. He stated that Mr. Green's letter explained it clearly and if the responsibility of the drugs goes to the physician, it would be permissible. He added that it does not mean the physician cannot hire Mr. Green and his staff to manage the medications. Director Troughton stated that the drug is theirs and the physician understands the responsibility of those drugs are his. He further stated that as far as using the machine, you are managing that whole part of the practice and GDNA does not see anything wrong with that at all.

After further discussion, the Board recommended Mr. Green be allowed to continue doing everything he was doing; however, the restock list needed to be signed off by a provider stating they are accepting responsibility for those medications as though it were an invoice. Additionally, this information needed to be clear in a policy. Director Troughton advised Mr. Green to make sure that the system has a way to distinguish from the time the drug was purchased until the time it is disposed of. Director Troughton added that the pharmacy has to separate out what went to the jail and what stayed at the hospital because that is information GDNA will want to know. He explained that Mr. Green needed to make sure the system can provide accountability of what drugs are where especially since they are being sent out to a location.

**Approval of Minutes**

Mr. Stone made a motion to approve the Public and Executive Session minutes from the November 15, 2023, meeting. Mr. Bracewell seconded, and the Board voted unanimously in favor of the motion.

**Report of Licenses Issued**

Mr. Stone made a motion to ratify the list of licenses issued. Mr. Farmer seconded, and the Board voted unanimously in favor of the motion.

**Petitions for Rule Waiver or Variance**

**Rule Waiver Petition from CVS/pharmacy:** The Board considered this petition for a variance of Rule 480-10-.01(1)(b). Mr. Stone made a motion to grant the petition since the system will undergo an update in February 2024 with the understanding that CVS/pharmacy will notify the Board once the update is complete. Mr. Brinson seconded, and the Board voted in favor of the motion, with the exception of Mr. Cordle, who recused himself from the vote.

**Rule Waiver Petition from Dodge County Hospital-Corp, PHH004088:** The Board considered this petition for a waiver of Rule 480-13-.05(2)(b)(1), Rule 480-13-.06(2)(a), and Rule 480-11-.04(3)(b)(1). Mr. Brinson made a motion to grant the petition with a reminder to continuously comply with USP guidelines. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**Rule Waiver Petition from Morgan Medical Center, PHH007993:** The Board considered this petition for a waiver of Rule 480-13-.05(2)(b)(1), Rule 480-13-.06(2)(a), and Rule 480-11-.04(3)(b)(1). Mr. Brinson made a motion to grant the petition with a reminder to continuously comply with USP guidelines. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**Correspondences**

**Correspondence submitted on behalf of the American Pharmacists Association, the Council on Radionuclides and Radiopharmaceuticals, Inc., the National Association of Nuclear Pharmacies, and the Society of Nuclear Medicine and Molecular Imaging:** President Azzolin noted that the Board has previously discussed correspondence submitted on behalf of these associations before regarding an inspection form developed by NABP relative to USP <825> which provides standards for their industry. He stated that these organizations are not satisfied with the inspection form. Director Troughton stated that GDNA respects NABP; however, GDNA follows Georgia's law and rules and will set up its inspections to coincide with Georgia's law and rules. The Board directed staff to respond by stating that GDNA creates its own inspection forms based on Georgia's law and rules.

**Correspondence from Derrick Lancaster, Cardinal Health Nuclear & Precision Health Solutions:** The Board discussed this request from Cardinal Health regarding certifying its nuclear pharmacy technicians using the Cardinal Health training and assessment program. President Azzolin explained that the correspondence referenced that does not appear to give the option of an entity creating its own education that satisfies the requirement as long as the Board approves. He stated that it is very specific to nuclear pharmacy. He inquired if the Board certified the technician and the technician leaves his/her job to go to a retail pharmacy, for example, was there a way to determine the technician was only certified for purposes of nuclear pharmacy within the practice. Mr. Chang stated that the program was specific to the practice. He was in agreement that it was sufficient; however, he inquired as to what would happen if the technician left to go to another practice setting.

President Azzolin inquired if the Board could say the certification was applicable to nuclear settings. Mr. Changus stated that Rule 480-15-.01(b) states that a "Certified pharmacy technician" shall mean a registered pharmacy technician who has either successfully passed a certification program approved by the Board, or has successfully passed an employer's training and assessment program approved by the Board, or has been certified by either the Pharmacy Technician Certification Board (PTCB) or any other nationally recognized certifying body approved by the Board.

President Azzolin commented that the question concerns certifying a technician based on education specific to a specialized practice and the technician going to another location not related to that same business model. He inquired if the technician would be qualified to count towards the ratio requirement in the other setting. Director Troughton responded by stating that if there are technicians in nuclear pharmacies that are certified and were certified by PTCB they are considered certified technicians. He continued by stating that

their certification was not nuclear, but now they are working in a nuclear setting where they will be trained by their company. He stated that if GDNA sees the technician is certified, whether it is for nuclear or another setting, that is where it stops. He added that, at that point, GDNA was not asking what area the technician was certified.

Mr. Chang inquired if Cardinal Health offered any other type of training other than what was requested. Mr. Lancaster, Cardinal Health Nuclear & Precision Health Solutions, was present and spoke to the Board. He responded by stating they have several national certified technicians; however, most are lifelong nuclear technicians. He stated that was the reason behind having certification done this way as they would like to have the technicians be certified in nuclear pharmacy only.

Mr. Changus stated that the concern was if the technician leaves the nuclear pharmacy setting. He asked in terms of the requirements that are in the rules, would that address the concerns whether or not they are able to practice in another setting. President Azzolin responded by stating that it applies to all technicians, not just certified technicians. Mr. Changus commented that if the concern was whether someone can move from a nuclear pharmacy setting to retail, he would assume in most cases they could. He added that if the technician has the education and brushed up on more general technician duties, then maybe that will allay the concerns.

President Azzolin inquired as to how the Board kept up with who was certified. Mr. Lacefield responded by stating that a designation was added to the technician's record and one can check the Board's website to see if the technician was certified. He added that if the Board authorized it, the technician would send the board office a copy of their completion certificate and board staff would add that designation.

Discussion was held regarding PTCB having expiration dates on their certificates and what happens when the certification expired. President Azzolin stated that if the website showed the technician was certified, would that be acceptable to GDNA. Director Troughton responded by stating that some stores have 30 to 40 technicians tied to a store and GDNA does not go through all 30 to 40 technicians to see which ones are certified. He added that GDNA tends to take the word of the pharmacist; however, if the technician was there, GDNA may ask for proof of certification. President Azzolin inquired if GDNA would accept verification from the Board's website showing the technician was certified. Director Troughton answered affirmatively.

Mr. Lacefield stated that prior to now technicians did not have any requirements for renewal but going forward they are required to obtain 20 hours of continuing education, which is what PTCB requires for renewal. He explained that the Board has added requirements that provide that additional continuing education for technicians. He requested the Board keep that in mind. President Azzolin responded by stating if the Board considers those 20 hours to be appropriate to maintain the certification, why can't we use those 20 hours to certify every technician that is registered. Mr. Lacefield commented that when the Board first talked about requiring continuing education for technicians, it discussed if it should require continuing education or require them all to be certified, and the Board leaned towards requiring continuing education. Mr. Chang stated that he thought the difference was actually training the technician and showing them how to do things. He stated that he felt the argument was different and concerns two different topics.

Mr. Brinson commented that the Board has already discussed the topic of requiring technicians to be certified. He stated that he was opposed to it then and will continue to be opposed to it. He further stated there are many great technicians that have been working in stores for 20 to 30 years and the Board should not require them to be certified. He added that when the rule was amended the Board agreed to require all technicians to obtain continuing education and not require them to be certified.

Mr. Stone commented that he was leaning towards certifying for a specialty setting. Mr. Chang inquired as to how the Board would track the certification if the licensee left a particular setting.

Mr. Bracewell asked Mr. Lancaster why he was not interested in having the technicians nationally certified. Mr. Lancaster responded by stating that Cardinal Health's training is very specialized and specific to what they are doing. He added that they do not need the technicians to know generic names or brand names of regular drugs. He added that he felt like that was the best way for them to certify their technicians inhouse. Mr. Lancaster continued by stating that there is also a cost issue of having technicians take a national exam.

Vice-President Page made a motion to approve the request. Mr. Farmer seconded. Discussion was held. Mr. Lacefield stated that if the request was approved, the rule states "certified", which is one class of certification. He further stated that if the Board was considering doing another class of certification, the Board may want to include that in a rule. He continued by stating that if GDNA has to check ratios based on whether the technician is certified or not, or certified for a specific setting, he was unsure as to how that would work. President Azzolin responded by stating that the motion would just be to approve it as a certification that would follow the technician wherever they went and would not differentiate anything they were doing. He added that Mr. Lancaster stated they were not concerned about the technicians learning about generic names of drugs. If the technician ends up going to a retail setting, they will have to learn those things. Mr. Lancaster stated that when the technician comes to them, they have to teach the technician as the technician does not know anything about a nuclear setting.

Mr. Stone commented that he was leaning towards being against it because if the technician specializes in nuclear, then they need to be identified as nuclear. Mr. Bracewell commented that when the Board approves a training program for a certain store, it is saying that program is equal to the national certification.

President Azzolin inquired if the current Board or past Boards have approved continuing education for a business as a certification. Mr. Brinson commented that the technician would still have to take a certification test. Director Troughton inquired if any chain stores do that. Vice-President Page responded that they do not. Mr. Chang commented that it depends on what type of training it is. He added that if this rule is in place, it should allow independents or any other pharmacies to have a training program.

There being no further discussion, the Board voted in favor of the motion, with the exception of Mr. Bracewell and Mr. Stone, who opposed.

**Correspondence from Richard Burrell, Wellstar MCG Health:** The Board discussed this request for guidance on DEA registration for one of Wellstar MCG Health's offsite medical clinics, Georgia Radiation Treatment Center ("GRTC"). In his letter, Mr. Burrell asked if the GRTC clinic could operate as an extension of its inpatient pharmacy DEA registration since they are one of the clinic locations or would the GRTC clinic have to apply for a separate DEA registration in order for the clinic to utilize controlled substances since it has a different physical address. In response to his inquiry, the Board directed staff to respond by stating that the clinic location cannot operate as a department of the hospital. Additionally, the Board encourages them to follow all laws and rules relative to moving medications from one location to another.

**Correspondence from Sarah Mattmuller, HCA Healthcare-South Atlantic Division:** The Board discussed this correspondence regarding Georgia hospital storage of patient owned medications. President Azzolin referred the Board to the DEA "Pharmacist's Manual" on Sharepoint. In summary, President Azzolin stated that the DEA's policy manual states that if a patient gives a medication to the hospital to keep in their possession because the patient has no way to take the medication home, the DEA considers that to be illegal distribution by an unlicensed entity. In her letter to the Board, Ms. Mattmuller states that

HCA wants to have the security department of the hospital take the medications brought by the patient, place them in a tamperproof bag, and secure them, which they feel meets the DEA requirement. President Azzolin inquired if this was appropriate relative to Georgia rules and regulations.

Director Troughton commented that he could not speak for the DEA and could only speak from experience. He stated that if you start putting drugs in places that are not licensed and putting them under the control of people who are not licensed, he has seen that turn out bad. He added that GDNA has not seen an issue with storing it in the pharmacy or the patient's room. President Azzolin stated that Rule 480-13-.08 outlines the requirements for drugs brought into the hospital by patients or patient's family members. Director Troughton stated that GDNA would look at the hospital's policy as to how they would handle that. He further stated that the DEA wants them to give the medications to a family member to take home. He added that according to federal transfer law, anytime you hand it to anyone, you have violated that law. GDNA has not seen any issues where the medication was the responsibility of a licensed pharmacist or pharmacy. Director Troughton stated that, from GDNA's standpoint, what they are asking to do is not a good idea.

President Azzolin stated that Rule 480-13-.08 states that if a hospital does something other than taking that medication and storing it in the pharmacy, that method must be approved by an agent of the Board. He further stated that according to the correspondence, Agent Rowe told them to ask the Board if what HCA was doing was permissible. He inquired as to how the Board should proceed. Director Troughton responded by stating that giving the medication to a family member has never been an issue; however, giving it to an unlicensed person seems to be in violation of the Board's rule. He stated that there are times the patient did not receive their medications back when they were discharged and the hospital would have to contact them; however, if hospital personnel does not reach out to the individual about their medications, you open the door to diversion. He added that every step away from that and putting it away where it is supposed to be stored and left is an issue.

Mr. Farmer stated that in Rule 480-13-.08 there is no discernment between controlled and non-controlled substances. He added that the rule only speaks to "drugs". President Azzolin responded by stating that on page 85 of the DEA's manual it gives a pathway for controlled substances to be stored. He added that the manual indicates that when there is no other way to get the medication out of the hospital by a family member of the patient there should be a locked case in the patient's room where their possessions can be stored. Director Troughton stated that the manual is only guidance.

After further discussion, Mr. Brinson made a motion to direct staff to respond to Ms. Mattmuller by stating that it is the opinion of the Board that the security department handling patient owned medications outside of the licensed area of the pharmacy and not being handled by licensed professionals is not an acceptable method of storage. The Board encourages HCA hospitals in Georgia to be compliant with Georgia law and rules and DEA regulations. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton**

Director Troughton reported that GDNA's newest agent will be starting on January 2, 2024.

Director Troughton reported that GDNA conducted 1466 inspections and received 253 complaints for FY2024.

**Attorney General's Report – Mr. Max Changus**

No report.

**Executive Director's Report – Mr. Eric Lacefield**

**Continuing Education Report:** Mr. Stone made a motion to ratify the below continuing education program approved since the previous meeting. Vice-President Page seconded, and the Board voted unanimously in favor of the motion.

| Date of Program | Hours | Sponsoring Group | Program Title | CE Code |
|---|---|---|---|---|
| 11/06/2023 | .5 | The Medical Center - Atrium Navicent Health | New Clostridiodes Difficile Therapy | 2023-0013 |

**March 2024 Meeting Date:** Mr. Lacefield stated that the Board voted to approve March 6, 2024, as its meeting date at the Department of Community Health's offices. He explained that the board office heard back from South University and they can accommodate the Board meeting on March 6th or March 13th. The Board agreed to keep the date as March 6, 2024, and move the location of the meeting to South University.

**Legal Services – Mr. Clint Joiner**

No report.

**Miscellaneous**

**Chart Orders:** President Azzolin stated that there has been discussion concerning adding verbiage associated with chart orders particular to nursing home rules. He further stated that there were drafts available on Sharepoint for review and discussion.

Director Troughton suggested a committee be put together to review the rules as there are a number of different rules that will be affected. He added that this is not something to change quickly. President Azzolin stated that one concern he had was that the Board does not treat nursing homes like hospitals. He continued by stating that many times providers do not differentiate when writing in a chart that this is a prescription in a retail setting versus an order in a hospital setting and they will not include the quantity. He inquired as to how much should you dispense if dispensing as retail on that chart order. Director Troughton discussed the draft rules needing a more in depth review with GDNA's input.

Mr. Stone made a motion to table the rules to allow additional time for review. Mr. Brinson seconded, and the Board voted unanimously in favor of the motion.

**Rule 480-15-.03 Use of Registered Pharmacy Technicians and Other Pharmacy Personnel:** President Azzolin commented that the Board has had a lot of discussion on this topic. He stated that the Board voted to post changes to 480-15 that would allow for the definition of direct and personal supervision to include remote technicians and would allow for technicians not physically onsite in a pharmacy to not be counted towards the ratio of those technicians that are in a pharmacy. He added that this topic was on the Board's November agenda; however, he and Mr. Changus were not present and the Board agreed to table discussion until the December meeting. Vice-President Page stated that he wanted to make sure the Board received everyone's input on the subject.

President Azzolin discussed South Carolina's policy regarding remote order entry by technicians. He stated that they have policies that interpret their laws and do not have rules in the same sense the Georgia Board has rules. He continued by stating that South Carolina's policy reads, "The SC Board of Pharmacy interprets 'direct supervision' and 'personal supervision' as stated in the SC Pharmacy Practice Act and its corresponding regulations and policies to allow remote order entry by technicians registered with the SC BOP when the best practices listed below are being utilized and are being supervised by a SC licensed pharmacist:…"

President Azzolin stated that after the Board voted to post the changes to the rules it wanted to amend in Rule 480-15-.03, Mr. Changus' memo implied that the Board may not have statutory authority to make the changes. He stated that he wanted to provide the information from South Carolina to see if it edged consideration for the interpretation of direct personal supervision to mean that the Board does have authority to interpret it that way.

Mr. Stone commented that South Carolina's policy discusses secured access, ratio requirements, and specifies who is eligible to work from a remote alternative worksite. He added that he felt it was a good policy.

President Azzolin stated that the Board voted to post amendments to the rule and inquired as to what the next steps were for the Board. Mr. Changus responded by stating that his response was bringing up issues he saw with moving forward with the rule. He continued by stating that when the General Assembly required technician registration, it was thinking of technicians assisting pharmacists in a physical space. Mr. Changus added that the definition of "pharmacy technician" means "those support persons utilized in pharmacies…". He stated that the rules that were voted on to post basically acknowledge the technicians will work outside the pharmacy, which is an issue he thought was worth bringing up.

Mr. Changus stated that the second issue is how the Board defines "direct supervision" elsewhere in its rules where it contemplates a more in person supervision, which needs to be addressed more specifically.

Mr. Changus commented that the last issue concerns trying to obviate the direction in the statute about the ratio. He stated that President Azzolin identified that the ratio contemplates that in-person setting. He continued by stating that the ratio and diversion concerns may not be the same if there are technicians moving the information towards the pharmacy and a pharmacist to review.

Mr. Changus stated that the memo was presented to the Board just prior to the previous meeting and he did not think anyone had time to fully digest it yet. He further stated that he felt there were potential issues with the language the Board voted on. He explained that the memo was from the Attorney General's office and if the Board voted to proceed with a public hearing, it could do that; however, the Governor's office expects to see a memo granting statutory authority and the concerns he raised may result in a quick kick back from the Governor's office. He added that the Board could ask Mr. Lacefield to post the rule for public hearing understanding the concerns raised by the Attorney General or it can make modifications to the rules it voted to post previously. Mr. Changus stated that the memo identifies an opportunity for reconsideration of several points with the ratio being the easiest one that can be picked out by someone reviewing it and inquiring as to how that would work. He further stated that he thinks his memo indicates the Board may be able to get around supervision. He continued by stating that South Carolina has defined personal direct supervision to include someone operating from a remote location and with having an example of how another Board looked at this issue, the language may need to be cleared up in the statute. He added that the General Assembly may say it seems right for reexamination on the legislative front. Lastly, Mr. Changus stated that if the Board was looking to do away with the ratio, the General Assembly may not understand why the Board was looking to do that.

President Azzolin discussed workloads and gave an example of a remote technician doing data entry for a particular pharmacy. He stated that one minute the technician processes a prescription for a pharmacy and when they are done with that prescription, the technician moves on to the next pharmacy. He added that the technician was no longer affiliated with that pharmacy. After further discussion by President Azzolin, Mr. Changus stated that he felt the described workload was far moved from what a pharmacy technician is as adopted in the statute. He stated that he understands there is workflow and there is supervision. He added that the statute requires the technician to be supervised. He continued by stating that he understands that is how things are moving, but with what President Azzolin described, there is no supervision.

President Azzolin responded by stating that there would be supervision because the pharmacist would be supervising the data entry. He stated that the reason he pointed out that scenario and the reason the Board put that language in the rule was because it wanted to carve out remote technicians from the ratio because that scenario will occur. He continued by stating that if the pharmacist does not have a clear idea whether it is okay if multiple remote technicians support the pharmacy in sequence, there will be confusion for the primary pharmacy that is processing the prescription. President Azzolin stated that the pharmacy will not know at any moment whether or not they are in compliance with the ratio requirement. He explained that by taking the remote ones out from the ratio because they do not have physical access in the pharmacy in the Board's rule, the Board is saying they are not associated with the ratio. He added that there is no worry when those scenarios occur with technicians processing at different locations. President Azzolin stated that if Mr. Changus was stating there is concern and the rule should be reviewed again for the Board, it can do that. He further stated that he ultimately wants to see where someone with authority says the Board can or cannot do it, and if not, the profession can go to the legislature. He added that if there was an issue with moving it forward to the Governor's office, then the Board needs that feedback so it knows there is nothing else that can be done from a rule perspective and that it would need to be resolved legislatively.

Vice-President Page stated that he felt the next step would be for the Board to reassess the rule and see if it satisfies the Attorney General's office. He stated that if it does not, then the Board should go the legislative route.

President Azzolin inquired if the Board could forward the rule to the Governor's office even if it there was no statutory authorized given by the Attorney General's office. He asked what risk that posed. Mr. Changus responded by stating that he was here to advise the Board and trying to give the best advice he could give. He commented that in President Azzolin's analysis of it through workflow and how it works, makes sense because President Azzolin is a pharmacist. Mr. Changus explained that he is looking at terms and language and what he understands of legislative history and legislative intent. He stated that he had pointed out the concerns, which was considered legal advice. He added that if the Board felt the best thing to do was to move the rule forward as is for a public hearing, that is the Board's prerogative. He continued by stating that he does not want to be in a position of telling the Board how to go about it because he is not an expert in the field of pharmacy; however, he felt the ratio would be a red flag. Mr. Changus stated that the Governor has the authority to approve and disapprove rules.

President Azzolin commented that over a year ago the Board passed a rule that allowed for the modification of the number of times an applicant could take the NAPLEX or MPJE. He stated that the Board voted to post the rule, adopted the rule at the public hearing, and then it moved to the Governor's office where it was rejected and came back to the Board with suggested modifications which the Board agreed to. He added that he felt that was a good process and would like to get to that point.

Mr. Stone commented that he agreed with Vice-President Page about reassessing the rule and talk about other options that may help provide clarification. Mr. Farmer agreed with Mr. Stone. He stated that he voted to post the rule and was in support of everything about this, but what is giving him pause is how the ratio applies differently offsite versus onsite.

There being no further discussion, Vice-President Page made a motion for the Board to table Rule 480-15-.03 Use of Registered Pharmacy Technicians and Other Pharmacy Personnel for additional review. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

**DEA Guidance to Pharmacies on the Dispensing of Certain Tetrahydrocannabinols (THC):** The Board discussed the DEA's memo dated November 27, 2023, regarding Guidance to Pharmacies on the Dispensing of Certain Tetrahydrocannabinols (THC). President Azzolin inquired if there was a

representative from the DEA present. There was not. He read the following memo sent to Georgia pharmacies from the DEA:

*Dear DEA-Registered Pharmacy:*

*Recently, the State of Georgia provided guidance to pharmacies on the dispensing of certain tetrahydrocannabinols (THC).*

*All DEA registrants, including DEA-registered pharmacies, are required to abide by all relevant federal laws and regulations. A DEA-registered pharmacy may only dispense controlled substances in Schedules II-V of the Controlled Substances Act. Neither marijuana nor THC can lawfully be possessed, handled, or dispensed by any DEA-registered pharmacy. Under federal law, products derived from the cannabis plant with delta-9-THC content above 0.3% are considered marijuana, a Schedule I controlled substance. Further, products that contain any amount of a synthetically produced THC are considered to be tetrahydrocannabinols, likewise a Schedule I controlled substance.*

*Sincerely,*

*Matthew J. Strait*
*Deputy Assistant Administrator*
*Diversion Control Division*

Mr. Stone commented that he felt pharmacists are the best in helping a patient and guiding them with medications if they are going to be taking Low THC. He stated that he understood the DEA guidance, but it saddened him because Georgia law permitted this and the Board did its due diligence in promulgating rules and getting them passed. He further stated that he felt pharmacists are great in assisting patients in the treatment of their disease.

Mr. Farmer stated that when legal CBD products were put in the pharmacy a few years ago, he needed to learn more about them and had a student on a rotation do some research. He further stated that the number of drug interactions using any type of CBD was alarming. He added that the pharmacy handled it internally and decided to make sure patients were being advised properly. He stated that he agreed with Mr. Stone in that pharmacists should be there to assist patients given their knowledge and background.

Mr. Andrew Turnage, Executive Director, Georgia Access to Medical Cannabis Commission (Commission), was present and spoke to the Board. He stated that he wanted to provide encouragement in light of the correspondence received from the DEA. He further stated that the Board relies on the law, rules, and policies for guidance. He added that this was a federal issue and the DEA clearly restated their policy. Mr. Turnage stated that the Board of Pharmacy has been the Commission's partner along this journey. He explained that the Commission did not exist until 2019 with the passage of Georgia's Hope Act. He added that the intent of the legislation was for independent pharmacies to be an integral part of the Low THC program in Georgia. However, since that time they have received bad news on the good work they have accomplished up until this point.

Mr. Turnage stated that Georgia's Hope Act brought up the creation of secure production facilities where medical cannabis is grown and is available in dispensaries. He explained that there is a ceiling on the number of dispensing licenses that the Commission can issue. He continued by stating that if you look at the design of Georgia's Hope Act, the Board has an unlimited number of licenses it can issue, which means the legislation intended for the program and patients to have more access. He stated patients on the registry have severe and critical illnesses. He further stated those patients have a long term relationship with their physician and pharmacist. Mr. Turnage stated the Board accomplished bringing independent pharmacies to

the forefront. He added that the Commission's production licensees have been given the opportunity to distribute their products and give a patient access in locations where a business may never choose to go.

Mr. Turnage stated that the DEA memo cast a shadow on that forward progress and he wanted to encourage the Board to look at additional pieces of facts. He stated that the federal government has not revised its policy in over half a century. He explained that the Commission recently presented its great work and the Board's work at a recent conference. He stated that after the presentation, a number of states approached them. He further stated that it was really interesting to note other states that have similarities with Georgia. For example, they have a requirement that a pharmacist is present in their dispensaries.

Mr. Turnage stated that the DEA cannot interfere with any state regulatory program. He further stated that the licenses issued by the Board of Pharmacy and the Commission are an integral part of Georgia's Hope Act. He added that there is the DEA memo and an important policy, but it is one piece of factual information. He continued by stating that the Board and the Commission rely on the law and rules and federal policies that impact everyone. Mr. Turnage stated that the Commission's licensees are open for business and patients could rely on that. He further stated that it was not true that the Commission's program was shut down. He encouraged the pharmacies to stand together and understand that the Commission was their ally. He added that he felt it was important for everyone to reach out to members of congress who have the ability to encourage the DEA.

Mr. Gary Long, Botanical Sciences, was present and spoke to the Board. He explained that Botanical Sciences was one of the Class I license holders. He stated that he wanted to put a finer point on the impact the decision the DEA made has had on the patients in the state. He explained that after the Board's rules were passed, 130 pharmacies partnered with his company to offer access to Low THC products to patients around the state. He continued by stating that the DEA's memo has had a profound impact on the state, patients, and pharmacists. He stated that the Board, the Commission, and the Governor's office have an obligation to stand up for what is right for the patients because this has many implications.

Ms. Tracy Smith, Botanical Sciences, was present and spoke to the Board. She stated that Botanical Sciences hosted an event for doctors and patients in Albany, which was pre-planned before the DEA letter was sent. She stated that fifty patients signed up. She explained that the patients will now have to drive six hours to get the product because of the DEA's memo. She stated that this has impacted 4.4 million patients in Georgia that no longer have access.

Ms. Dawn Sasine was present and spoke to the Board. She stated that she appreciated what Georgia was trying to do. She further stated that she felt strongly that pharmacists needed to be involved in the process. She added that, in light of what is going on, she hoped that there was support in making sure pharmacists would be involved in the dispensing process even if it was not in a pharmacy setting.

President Azzolin stated that Georgia passed laws. He further stated that the Board's responsibility was to promulgate rules around those laws, which it did. He continued by stating that pharmacies are issued a pharmacy license before being issued a DEA permit, that it's not a requirement for a Georgia licensed pharmacy to possess a DEA permit and that some may not. He added that the letter from the DEA was specific to DEA licensed pharmacies, and as such, he believed the Board's rules were still valid. He stated that it would be up to the pharmacy to determine whether or not they were in violation of DEA regulations. President Azzolin added that, based on that, he believed there was still some potential relative to what some pharmacies can do in certain circumstances.

Director Troughton commented that GDNA would need direction from the Board on how to proceed. He stated that since the date of the DEA letter, which was November 27, 2023, GDNA has not done any other inspections of Low THC pharmacy applicants. He explained that GDNA is not part of the Board, but works

at the pleasure of the Board, and he has different responsibilities as well. He continued by stating that as of the 27th GDNA has not conducted any further inspections. Director Troughton stated that there were pending applications and he has received many calls from applicants. He further stated that he would need clear guidance from the Board as to whether it wants to continue to issue the permits. He continued by stating that if that was the case, GDNA would conduct the inspections, but he would obtain legal advice prior to doing so because he runs an agency that has other responsibilities and he would want to make sure he was not putting the agency at risk.

President Azzolin requested Mr. Changus' opinion concerning the statement President Azzolin made relative to the validity of the Board's laws and the rules it promulgated to issue a permit to a pharmacy that gives them authority to dispense Low THC if they deem themselves able to do so. Mr. Changus responded by stating that the concerns from the DEA are broader in terms of what it declares can be possessed by a DEA licensed pharmacy. He stated that possession of a Schedule I controlled substance is illegal under federal law. He further stated that in speaking with Director Troughton there is a concern about whether or not we are inviting Board licensed pharmacies to engage in actions that might run afoul of the DEA. He added that, to the extent the Board would like legal advice, it can make referral for such.

Director Troughton commented to the speakers who spoke to the Board. He stated that he was speaking as an enforcement agent for Georgia. He further stated that he has a job to do and that is how he has to go about it. He added that he wants everyone's children to be healthy and happy, but that is not what we are talking about. Director Troughton stated that the question concerns how GDNA moves forward. He explained that he has received many questions from pharmacists. He added that when the DEA comes in and takes a pharmacy's permit, along with every controlled substance in that pharmacy and issues a Memorandum of Understanding of what the pharmacy has done and what they possessed, that is the scope of what we are talking about. He stated that if the Board's direction is for GDNA to continue inspections, he will do what he has to do.

President Azzolin stated that he would like the Board to have clarity on what it can do relative to permits, outstanding applications, and new applications that are received so it can give GDNA advice as to how it should proceed. He further stated that the Board respects what the DEA enforces; however, the Board's laws instructed the Board to promulgate rules which allow the Board to issue a license to an applicant. He continued by stating that it was not illegal for an applicant to hold a Low THC license. He stated that whether or not a pharmacy orders products based on whether or not they have a DEA permit and whether or not they consider it risky is outside the Board's purview. President Azzolin commented that when an application for a pharmacy license is received, the Board does not know if the pharmacy holds a DEA permit. Director Troughton responded by stating that the Board does know because GDNA goes out there and looks at it. He stated that GDNA knows exactly who holds a DEA permit. He added that it is told to the Board because it is told to GDNA.

President Azzolin stated the Board needed clarity from a legal perspective as to whether or not the Board could issue Low THC permits. He further stated that because they have a permit does not mean they have product. He continued by stating that it seems impossible to not issue a permit to those pharmacies that do not have a DEA permit. He stated that the question would be is it appropriate for the Board to direct GDNA to issue permits to DEA licensed pharmacies that are requesting a Low THC permit? Mr. Changus responded by stating that a request for advice can be referred to the Attorney General's office.

Mr. Joiner stated that O.C.G.A. § 16-12-206(a)(1) reads as follows:
"(1) Upon request by a licensed pharmacy in this state, the State Board of Pharmacy shall be authorized to develop an annual, nontransferable specialty dispensing license for an independent pharmacy with a registered office located within this state to dispense low THC oil and products to registered patients. The

State Board of Pharmacy shall develop rules and regulations regarding dispensing pharmacies in this state in accordance with the requirements contained in subsection (b) of this Code section."

Mr. Joiner stated that having developed those rules as the Board of Pharmacy was demanded to do by law, can the Board adopt a position of not issuing those permits? Mr. Changus responded by stating that would be part of the inquiry to the Attorney General's office.

Mr. Farmer inquired if an application was submitted and the license holder did not have a DEA permit, would there be any cause to not proceed. Mr. Changus responded by stating that would be a part of the inquiry. He stated that it is not the same concern as if a pharmacy holds a DEA permit. He further stated that now that the DEA has reasserted that this is a Schedule I controlled substance, he feels it is worth looking into that question as well. Mr. Changus continued by stating that the answer may be there is no real concern, but this impacts the role of pharmacy and what GDNA's role is in going in and approving the pharmacies for licensure. He added that there may be other statutory provisions worth looking at as well.

President Azzolin stated that, for the time being a pharmacy may submit an application for a Low THC permit, but allow Mr. Changus to render advice first before moving forward with approving the application. He further stated that the Board's goal is to come to a conclusion as to whether or not it is appropriate.

Mr. Bracewell commented that Mr. Farmer made a point of a pharmacy not needing to hold a DEA permit to function. He inquired if a pharmacist could possess heroin or marijuana legally. Director Troughton responded by stating that in its letter, the DEA pointed out that marijuana is a Schedule I controlled substance. He stated that the difference here is Georgia is the first state where a DEA licensed facility is involved in the transactions and at this moment the Board is trying to figure out what that means.

Director Troughton stated that there are 23 active Low THC permits that may possess and may be making transactions. He has been asked by several pharmacies how they should proceed. He stated that he does not speak for the Board, but he, as an individual, would not have a product in his pharmacy that the DEA has designated as a Schedule I controlled substance. He stated that the active license holders need to be informed of something.

Ms. Reybold, GPhA, was present and spoke to the Board. She stated that from what she understands if the DEA reschedules marijuana as a Schedule III, it will still remain illegal under federal law, but would open it up for FDA approval as having some sort of medical use. She further stated if it was moved to Schedule III, it would fall under the Controlled Substances Act. She added that it will still be illegal until it is FDA approved as it still has to go through the FDA approval process from what she has been told.

President Azzolin suggested that the Board pause on the issuance of permits for now. Additionally, he suggested the Board not recall those licenses that have been issued, but rather pause the process for the time being. In regards to the 23 active Low THC permits, Director Troughton inquired if the Board wanted to issue a statement. President Azzolin responded by suggesting the Board issue a correspondence stating that the Board encourages every pharmacy that has a pharmacy permit in Georgia to be compliant with DEA regulations.

There being no further discussion, Mr. Stone made a motion for the Board to request legal advice from the Attorney General's office regarding continued issuance of Low THC Pharmacy Dispensary Licenses. Mr. Farmer seconded, and the Board voted unanimously in favor of the motion.

**Online Meetings:** President Azzolin stated that he felt pharmacists should have the opportunity to be a part of the meeting without being physically present. Mr. Brinson commented that he felt that Mr. Lacefield should be the only one to make that determination. President Azzolin disagreed and stated that he felt it

should be up to the Board and the Board should find a way to accommodate the public having access to the meetings if they cannot attend in person whether that be a recording of the meeting or live stream. He added that there would not be an open mic option. Mr. Chang commented that some states do have a recording of the meetings available.

Mr. Stone stated that he would like to discuss it further to see what it would entail and make a list of the pros and cons. He further stated that he tells everyone to attend the meeting in person or read the minutes. He added that the Board does not have control over all things with technology. Mr. Stone suggested staff looking into it further before the Board says it will do it.

After further discussion, the Board suggested tabling the topic until its January meeting.

**Newsletter:** President Azzolin inquired as to how many newsletters had been done. Mr. Farmer responded by stating that it was passed on to him by Vice-President Page. He added that there would be a newsletter in December.

Mr. Stone commented that he had been doing some research to see how the Board could improve its process. He added that he has been gathering information and looking at contacting other newsletter services.

President Azzolin informed Mr. Farmer that if it would help with content generation to contact him and he would provide something for the newsletter concluding his presidency.

**Election of Officers:** Mr. Stone made a motion for Vice-President Page to serve as President. Mr. Bracewell seconded, and the Board voted unanimously in favor of the motion.

Mr. Brinson made a motion for Mr. Cordle to serve as Cognizant and Vice-President. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

Mr. Bracewell made a motion and Mr. Brinson seconded, and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. § 43-1-19(h) and § 43-1-2(h) to deliberate and to receive information on applications, investigative reports, and the Assistant Attorney General's report. Voting in favor of the motion were those present who included Michael Azzolin, Jim Bracewell, Michael Brinson, Young Chang, Cecil Cordle, Michael Farmer, Chuck Page, and Dean Stone.

## Executive Session

**Appearance**

- N.L.F.

**Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton**

- GDNA Case # B34723
- GDNA Case #A34993

**Cognizant's Report – Mr. Chuck Page**

- GDNA Case # T35003
- GDNA Case # T35048
- GDNA Case # A34970
- GDNA Case # A34939
- GDNA Case # A35009

- GDNA Case # A34553
- GDNA Case # B34988
- GDNA Case # B35031
- GDNA Case # B34918
- GDNA Case # A35011
- GDNA Case # B34999
- GDNA Case # B34951
- GDNA Case # B35045
- GDNA Case # B34997
- GDNA Case # B34975
- GDNA Case # B34954

**Attorney General's Report – Mr. Max Changus**

Mr. Changus presented the following consent orders for acceptance:

- U.C.G.G.
- S.P.
- M.P.I.
- W.
- D.
- D.P.
- S.D.C.
- F.R.
- A.D.B.
- D.B.L.
- P.L.
- E.J.C.H.
- A.S.
- J.K.M.
- P.S.P.

Mr. Changus presented the following Voluntary Cease and Desist Orders for acceptance:

- R.P.
- E.E.

Mr. Changus presented the following Order of Summary Suspension for acceptance:

- R.W.W.

Mr. Changus discussed the following cases:

- M.P.
- A.P./R.T.D./A.M.S./T.T.A.

**Executive Director's Report – Mr. Eric Lacefield**

- A.M.J.

**Legal Services – Mr. Clint Joiner**

No report.

**Applications**

- J.M.B.

- W.D.L.
- B.S.
- A.P.
- D.P.T.
- T.A.W.
- C.I.B.
- G.T.D.
- M.E.S.
- J.T.S.
- J.J.K.
- A.M.O.
- A.K.P.
- C.S.S.
- H.C.K.
- J.S.I.
- K.F.A.
- S.M.B.
- S.M.S.
- S.G.
- V.M.P.

**Correspondences/Requests**

- P.P.
- P.I.S.
- B.P.
- T.S.P.
- A.A.
- P.R.P.
- W.P.N.
- S.P.
- C.V.S.P.
- A.I.L.
- A.S.
- E.L.M.
- J.C.E.
- J.A.U.
- R.T.B.
- T.O.B.
- K.P.M.

No votes were taken in Executive Session. President Azzolin declared the meeting back in Open Session.

## Open Session

Mr. Stone made a motion for the Board to take the following actions:

**Appearance**

| | | |
|---|---|---|
| • N.L.F. | Request to reinstate pharmacist license | Refer to the Department of Law |

**Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton**

- GDNA Case # B34723 Update provided
- GDNA Case #A34993 Update provided

**Cognizant's Report – Mr. Chuck Page**

- GDNA Case # T35003 Deny pharmacy technician application
- GDNA Case # T35048 Refer to the Department of Law
- GDNA Case # A34970 Refer to the Department of Law
- GDNA Case # A34939 Refer to the Department of Law
- GDNA Case # A35009 Refer to the Department of Law
- GDNA Case # A34553 Refer to the Department of Law
- GDNA Case # B34988 Close with Letter of Concern
- GDNA Case # B35031 Refer to the Department of Law
- GDNA Case # B34918 Misfill Guidance #1A
- GDNA Case # A35011 Refer to the Department of Law
- GDNA Case # B34999 Close with Letter of Concern
- GDNA Case # B34951 Close with Letter of Concern
- GDNA Case # B35045 Close with no action
- GDNA Case # B34997 Close with no action
- GDNA Case # B34975 Close with no action
- GDNA Case # B34954 Close with no action

**Attorney General's Report – Mr. Max Changus**

Mr. Changus presented the following consent orders for acceptance:

- U.C.G.G. Ratified acceptance of Private Consent Order
- S.P. Private Consent Order accepted
- M.P.I. Private Consent Order accepted
- W. Public Consent Order accepted
- D. Private Consent Order accepted
- D.P. Private Consent Order accepted
- S.D.C. Private Consent Order accepted
- F.R. Public Consent Order accepted
- A.D.B. Public Consent Order accepted
- D.B.L. Private Consent Order accepted
- P.L. Public Consent Order accepted
- E.J.C.H. Private Consent Order accepted
- A.S. Private Consent Order accepted
- J.K.M. Private Consent Order accepted
- P.S.P. Public Consent Order accepted

Mr. Changus presented the following Voluntary Cease and Desist Orders for acceptance:

- R.P. Voluntary Cease and Desist Order accepted
- E.E. Voluntary Cease and Desist Order accepted

Mr. Changus presented the following Order of Summary Suspension for acceptance:

- R.W.W. Ratified acceptance of Order of Summary Suspension

Mr. Changus discussed the following cases:

- M.P. Accept counterproposal

- A.P./R.T.D./A.M.S./T.T.A. Accept counterproposal

**Executive Director's Report – Mr. Eric Lacefield**

| | | |
|---|---|---|
| • A.M.J. | Denied Pharmacy Technician | Board directed staff to amend original denial letter |

**Legal Services – Mr. Clint Joiner**

No report.

**Applications**

| | | |
|---|---|---|
| • J.M.B. | Pharmacy Technician | Table pending receipt of additional information |
| • W.D.L. | Pharmacy Technician | Approved for registration |
| • B.S. | Pharmacy Technician | Approved for registration |
| • A.P. | Pharmacy Technician | Approved for registration |
| • D.P.T. | Pharmacy Technician | Approved for registration and flag file |
| • T.A.W. | Pharmacy Technician | Denied application |
| • C.I.B. | Nuclear Pharmacist | Approved application |
| • G.T.D. | Nuclear Pharmacist | Approved application |
| • M.E.S. | Nuclear Pharmacist | Approved application |
| • J.T.S. | Pharmacist Reinstatement | Table pending receipt of additional information |
| • J.J.K. | Pharmacist Reciprocity | Approved application |
| • A.M.O. | Pharmacist Certification of DTM | Approved application |
| • A.K.P. | Pharmacist Certification of DTM | Approved application |
| • C.S.S. | Pharmacist Certification of DTM | Approved application |
| • H.C.K. | Pharmacist Certification of DTM | Approved application |
| • J.S.I. | Pharmacist Certification of DTM | Approved application |
| • K.F.A. | Pharmacist Certification of DTM | Approved application |
| • S.M.B. | Pharmacist Certification of DTM | Approved application |
| • S.M.S. | Pharmacist Certification of DTM | Approved application |
| • S.G. | Pharmacist Certification of DTM | Approved application |
| • V.M.P. | Pharmacist Certification of DTM | Approved application |

**Correspondences/Requests**

| | | |
|---|---|---|
| • P.P. | Notice of Discipline | No action |
| • P.I.S. | Notice of Discipline | No action |
| • B.P. | Notice of Discipline | No action |
| • T.S.P. | Notice of Discipline | No action |
| • A.A. | Notice of Discipline | No action |
| • P.R.P. | Notice of Discipline | No action |
| • W.P.N. | Notice of Discipline | No action |
| • S.P. | Notice of Discipline | No action |
| • C.V.S.P. | Lockbox Request | Approved request |
| • A.I.L. | Correspondence | Board directed staff to respond by stating that a license was not required. |
| • A.S. | Request for extension of intern license | Approved request through |

| | | |
|---|---|---|
| | | 09/30/2025 |
| • E.L.M. | Request for extension of intern license | Approved request through 12/31/2024 |
| • J.C.E. | Request for 5th attempt to retake NAPLEX | Approved request |
| • J.A.U. | Request for 6th attempt to retake NAPLEX | Approved request |
| • R.T.B. | Request for 4th attempt to retake NAPLEX | Approved request |
| • T.O.B. | Request for 4th attempt to retake NAPLEX | Approved request |
| • K.P.M. | Request for reduction of late renewal and reinstatement fees | Denied request |

Mr. Cordle seconded, and the Board voted unanimously in favor of the motion.

There being no further business to discuss, the meeting was adjourned at 2:20 p.m.

The next scheduled meeting of the Georgia Board of Pharmacy will be held on Wednesday, January 10, 2024, at 9:00 a.m. at Mercer University College of Pharmacy, 3001 Mercer University Drive, Atlanta, GA 30341.

Minutes recorded by Brandi Howell, Business Support Analyst I
Minutes edited by Eric Lacefield, Executive Director