

GEORGIA BOARD OF PHARMACY
2 MLK Jr. Drive, SE, 11th Floor, East Tower
Atlanta, GA 30334
October 18, 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
Ron Acoff, Special Agent, GDNA
Max Changus, Senior Assistant Attorney General
Justin Cotton, Assistant Attorney General
Clint Joiner, Attorney
Brandi Howell, Business Support Analyst I

Visitors:

Stephen Georgeson, Georgia Retailers Association
Jordan Khail, UGA College of Pharmacy
Merrilee Gober, MAG
Melissa Reybold, GPhA
Dawn Sasine
Derrick Lancaster, Cardinal Health NPHS
Jeffrey White, T3 Labs
Mary Kate Snead, Guardian Atl-LTC
Leslie May, ElderCare Pharmacy
Bailey Creamer, Emanuel Medical Center
Matthew Frey, J.L. Morgan Company
Brandon Brooks, Publix
Michelle Blalock, Cardinal Health
Becca Hallum, GHA
Jennifer Duckett, Walgreens
Josh Mackey, Cap City Public Affairs
Ben Cowart, Georgia Retailers Association
Lauren Paul, CVS
Helen Sloat, HOG/Kaiser/Scion Health
Christina Green, Walgreens/GPhA
Rahul Bali, WABE News
Diane Sanders, Kaiser Permanente

Open Session

President Azzolin established that a quorum was present and called the meeting to order at 9:01 a.m.

Approval of Minutes

Mr. Bracewell made a motion to approve the Public and Executive Session Pharmacy Board minutes from the September 13, 2023, meeting. Mr. Stone 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 Emanuel Medical Center, PHH004239: 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. Mr. Farmer seconded. Discussion was held regarding adding a statement in the Board's response reminding the facility to continuously comply with USP guidelines. There being no further discussion, the Board voted unanimously in favor of the motion.

Rule Waiver Petition from T3 Labs, PHRS000878: The Board considered this petition for a waiver of Rule 480-7-.04(4). Mr. Stone made a motion to grant the petition. Mr. Brinson seconded. Discussion was held regarding the facility needing to let the DEA know there was a change of ownership even if the facility was keeping the same license number. There being no further discussion, the Board voted unanimously in favor of the motion.

Rule Variance Petition from Lilburn Community Pharmacy, PHRE009917: The Board considered this petition for a variance of Rule 480-6-.01(3). Mr. Brinson made a motion to grant the petition. Mr. Stone seconded. Discussion was held by President Azzolin who inquired if the facility listed the correct rule on the petition. Mr. Changus responded by stating that the intent was there to relax the requirement and he saw no issues with the request. There being no further discussion, the Board voted unanimously in favor of the motion.

Correspondences

Correspondence from Diane Sanders, Kaiser Permanente: The Board discussed this correspondence from Ms. Sanders regarding the DEA final ruling *Transfer of Electronic Prescriptions for Schedules II-V Controlled Substances between Pharmacies for Initial Filling*. Kaiser Permanente of Georgia (KPGA) requested the Board review its current regulation regarding the partial fill of CII prescriptions. Additionally, Kaiser Permanente of Georgia would like to know if the Board has any plans of changing the current Georgia regulation to align with the DEA's current regulation regarding partial fill of CII prescriptions.

Mr. Stone commented that what he understood is that as long as it is kept in the same format it was permissible. He stated that this arose from the "on hold issue" where the prescription is sent to your pharmacy and you are not filling it, but you are putting it on hold. He further stated that the patient changes pharmacies and wants to get it transferred from on hold to another pharmacy. He added that the DEA final ruling came from that issue. Mr. Stone stated that the DEA rule refers back to what they originally said about it being kept in the same format, which means you would have to have electronic means to submit that data the same way you received it.

Mr. Chang stated that in order to transfer anything from the pharmacy the pharmacy would have to use the same electronic secure system. He further stated that he did not think any pharmacies were linked that way to do it, which almost makes it impossible.

Director Troughton commented that each system has to have that DEA setup. He stated that GDNA has not seen where anyone can do that yet. He further stated that in reviewing the law and rules for both of Ms. Sanders' questions, GDNA did not see anything that would prevent that from happening because the DEA always says to follow state law and rules. He added that Ms. Sanders' first question was regarding an initial prescription, not for a refill. Mr. Farmer stated that "initial filling" were the two key words. Director Troughton stated that it was his understanding that the pharmacy can transfer one time. He added that from

GDNA's standpoint, it does not see an issue if the pharmacies can do this. Mr. Stone stated that it would then have to meet DEA requirements.

Vice-President Page inquired as to how GDNA would know it was transferred in that manner when conducting an inspection. Director Troughton responded by stating that the Board's rule is not set up to recognize this. He added that there is nothing in the law or rules that would prevent it. He stated that you assume they would maintain the proper records of showing where the transfer originated and where the prescription went to. Vice-President Page stated he was referring to what Mr. Stone brought up about the format. Vice-President Page stated that if they transferred the prescription, how would GDNA know that was compliant with the format. Director Troughton responded by stating that right now a physician can only send a prescription to a pharmacy if both systems meet the DEA requirements. He stated that GDNA assumes it does meet the requirements.

Mr. Stone stated that when they did the electronic prescribing for controlled substances, the pharmacy went through a process and the DEA verified the pharmacy. President Azzolin commented that if the pharmacy has been verified and the prescriber has been verified, if software in the future allows for that transmittal and the data comes across matching, there would be no issue.

In regards to Vice-President Page's comments concerning how would GDNA know if the prescription has been transferred, Mr. Joiner read the following from CFR 1306.08(4) which states:

- (4) The transferring pharmacist must add the following to the electronic prescription record:
 - (i) Information that the prescription has been transferred.
 - (ii) The name, address, and DEA registration number of the pharmacy to which the prescription was transferred and the name of the pharmacist receiving the prescription information.
 - (iii) The date of the transfer and the name of the pharmacist transferring the prescription information.

Director Troughton suggested the Board match the language in its rules. President Azzolin agreed and stated the Board's rule should match the DEA's rule so everything is consistent. He stated that this was a topic that would be discussed at the November meeting. He stated that the second part of the correspondence was regarding partial filling of C2's, which will also be addressed in November.

Director Troughton stated that this is not a problem for GDNA. GDNA is not looking to create a case as long as they are complying with the DEA regulations.

Ms. Sanders was present at the meeting and spoke to the Board regarding her request. She stated that the reason she brought this forward is because Rule 480-27-10(7) states, "Nothing in this rule is meant to restrict compliance with e-prescribing as permitted under the Medicare Prescription Drug Improvement and Modernization Act of 2003." She added that the Medicare Prescription Drug Improvement and Modernization Act of 2003 defines electronic prescribing. She stated if the Board says nothing prohibits them from doing it means that the Board is aligning with the Federal DEA regulations, and that means they are not prohibited from aligning with the DEA rules. She continued by stating that Kaiser Permanente wanted to make sure they received the okay from the Board before Kaiser Permanente did this. Ms. Sanders stated that all their other regions are doing it because they align with the federal regulations. In regards to the initial fill portion, she stated that none of their regions have any state regulations that prohibit it from taking place.

President Azzolin commented that there is not anything in the Board's rules that addresses initial fill. He stated that he would defer to GDNA as they are the agency that enforces it. Director Troughton commented by stating that they need to stay aligned with the DEA rules. President Azzolin stated that until the Board has rules saying that specifically, the minutes would reflect it is the Board's belief that this is permissible and GDNA would concur on such.

Ms. Sanders discussed the second portion of her correspondence related to partial fills. She stated that Kaiser Permanente is not doing that, but some other regions are. She further stated that the Board has the regulation regarding partial fills within 72 hours. She continued by stating that since the Board has not modified that rule, Kaiser Permanente cannot do that at this point. President Azzolin responded by stating that the Board has had discussions specifically since there have been a lot of controlled substances related issues that partial filling of CII's may be a good thing to prevent diversion. He added that the Board will be discussing that topic at its November meeting. He stated that, generally speaking, the Board agrees with the premise of not giving too many medications to patients.

Mr. Brinson inquired if there was anything in the law related to partial filling of narcotics. Director Troughton responded by stating that it is in the Board's rules. He stated that the Comprehensive Addiction and Recover Act (CARA) allows for such. He further stated that in discussion with attorneys in the past, the federal regulation trumps state law. Mr. Changus stated that it would be an easy defense if you were to try to take a case based on what your rule was and they say this is what federal law allows for.

Correspondence from Keevana Glossin: Mr. Joiner noted that this correspondence had been withdrawn by the sender.

Correspondence from Lauren Paul, CVS Health: Ms. Paul was present and spoke to the Board regarding Rule 480-10-.01 Controlled Substances and Dangerous Drugs: Inspection, Retention of Records and Security. Ms. Paul's correspondence states that CVS Health uses an electronic invoicing and check in system for controlled substances. The system is scheduled for an enhancement to capture the pharmacist license number in February 2024, which would be visible below the pharmacist's name currently captured and available electronically. Understanding that 480-10-.01(1)(b) was adopted by the Board and effective in May of this year, CVS Health wanted to propose an interim solution in lieu of printing the electronically captured and stored invoice to add the pharmacist license number electronically. CVS Health proposed two interim solutions for the Board's consideration to be compliant with 480-10-.01(1)(b) in lieu of printing until the enhancement for the system is completed early next year. One proposed interim solution would be to supply visibility to the electronic invoice showing the pharmacist responsible, captured as their electronic signature, and then match the name to the pharmacist license number posted within the pharmacy. An alternative proposed interim solution would be to have a list of pharmacist's names and license numbers available that could be match to the electronically captured pharmacist signature (i.e., name) on the invoice when asked. Ms. Paul explained that she did not feel the request fell to the level of being a petition for waiver or variance.

Director Troughton commented by stating that it will take time to get their software enhancement completed. He stated that for the long term the request would defeat the purpose of the rule; however, this is an interim solution. He further stated that CVS would have to attest that during the interim period CVS Health can specifically identify the pharmacist. President Azzolin inquired as to what would happen if CVS Health could not attest to that. Director Troughton responded by stating that if CVS Health could not provide the pharmacist was there, GDNA would not have a case.

Mr. Stone commented by stating that the reason the Board amended its rule is because of the issue with diversion and pharmacists not understanding their responsibility of making sure those controlled substances are there and checked in and making sure the pharmacist can be identified. He stated that the Board's intent was to be able to track it and stop the medications from getting on the street.

Mr. Changus suggested that to the extent this is going outside the rule requirements, it may be better for a rule petition to be formally submitted. He added that the idea of the Board giving the okay to not follow what the rule requires may be a habit it did not want to get into. President Azzolin suggested approving the request as the minutes would reflect the Board's discussion. He stated that it he was thinking about the

amount of time it takes to get a waiver approved. Director Troughton commented that it was clear that the request deviates from the rule. There being no further discussion, the Board agreed it would be appropriate for Ms. Paul to submit the request in the form of a rule petition.

Correspondence from Colquitt Regional Medical Center Pharmacy, PHH004628: The Board discussed the correspondence requesting approval for the operation of an Automated Medication System/Dispensing Machine in the County Jail Medical Department. Director Troughton commented that the request is asking to put floor stock in a jail and allow nurses to access it. President Azzolin stated that there is a provider there. Director Troughton stated that the Nurse Practitioner is there. He further stated they are not treating it as an emergency box, but they want to use it as floor stock. He added that he was not aware of any law or rule that would allow for such.

President Azzolin stated that the Board has talked about this issue previously. He explained that at the Board's February meeting, the Board went through all the ways of transferring medications out of the pharmacy to another location when a provider is there. He added that one way is to hand it over and have the provider sign saying that they are fully responsible. President Azzolin commented that the only difference in this scenario is there is a dispensing cabinet in that location. He stated that in the event they could not take it over there and it be pharmacy controlled, could they hand it over to the provider and let it be controlled by the provider in that cabinet. He further stated that the difference would be, as opposed to being in a drawer, it is in a machine that is locked.

Director Troughton agreed with President Azzolin and stated that this is them selling the drugs to jail and as a business agreement they would provide them with an electronic cabinet. He stated that once the drugs leave the pharmacy, it is the responsibility of the jail and the provider.

President Azzolin discussed how dispensing cabinets work. He stated that there is a server that can see all of the transactions that occur. He further stated that one can delegate through that server who has access. He stated that the pharmacy can see all the transactions because it is one simple server. Director Troughton responded by stating that he does not see any issue with selling the drugs and also hiring them to monitor the cabinet. He added that one thing the Board needs to take into consideration is the Board's stance on nurse practitioners dispensing controlled substances. He stated that the nurse practitioner can administer, but in regards to dispensing, he feels the Board needs additional information.

President Azzolin stated that there is a rule that allows for provider dispensing that references a law in Title 43. He further stated that law and rule allow for certain practitioners to dispense drugs that cannot be refilled. Director Troughton responded that previously the Board's stance on physician's assistants and nurse practitioners was that they could not dispense controlled substances, but could dispense dangerous drugs.

After further discussion, the Board recommended inviting a representative from Colquitt Regional Medical Center to the next meeting to further discuss the request.

Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton

Director Troughton introduced Special Agent Ron Acoff to the Board. He stated that Special Agent Acoff has been to a few of the Board's meetings in the past and does a terrific job for GDNA. He further stated that Special Agent Acoff covers the Fulton County area.

Director Troughton reported that GDNA conducted 960 inspections and received 164 complaints for FY2024.

Director Troughton discussed Low THC pharmacy dispensary specialty permit applications. He reported that GDNA has begun receiving the applications. He explained that the board office handles the administrative and financial portion of the application and once that process is complete, the application is forwarded in its entirety to GDNA. He stated that board staff sends the applicant a letter stating they need to contact GDNA for an inspection. He further stated that if the facility has met the requirements, GDNA will send a letter to the board office advising that the permit can be issued. He added that GDNA has received 13-14 applications so far.

Director Troughton stated that GDNA will be conducting its first Low THC dispensing inspection on Friday. He explained that GDNA has an inspection form and inspections will work just like other inspections. He stated that this is a new industry and as such, GDNA may be overly cautious in how it handles inspections for the first six (6) months to a year. Director Troughton explained that since this is a new process, there may be instances where GDNA has to bring questions to the Board or direct questions be sent in writing to the Board.

Director Troughton stated that there is a lot of information that is supposed to go on the label when the products are dispensed. He stated that the agents will be asked questions when they conduct an inspection. He further stated that one question will be concerning labels. He continued by stating that when the pharmacist puts the labels on the bottles, the pharmacist will not put all that information and get it on the majority of those THC bottles. He stated that he was fine with putting the product in a Ziploc bag or container and put a label on it because the pharmacist cannot unpackage the product. Director Troughton stated that GDNA has already been asked that question and he does not know of any other way to handle it.

Mr. Stone stated that Rule 480-52-10(4) states:

- (4) All Low THC Products dispensed shall be labeled by the Low THC Pharmacy Dispensary with the following information:
 - (a) Date the Low THC Product is dispensed to the patient;
 - (b) Patient identification information:
 1. Patient's first and last name;
 2. Patient's date of birth;
 3. Patient's unique patient registry serial number;
 4. Patient's caregiver's first and last name and unique patient registry serial number, if applicable.
 - (c) Name, address, and license number of the Low THC Pharmacy Dispensary;
 - (d) Directions for use of the Low THC Product; and
 - (e) Any cautionary statement or symbols required.

Mr. Stone stated that he was in agreement that there is a lot of information that has to be included on the label. He further stated that the Board may need to quickly adjust its rules after GDNA begins inspecting these pharmacies.

Director Troughton stated that the board office received a Low THC application, but the applicant did not hold a predicate license so the application was sent back. He further stated that applicants are sending in applications for a new retail pharmacy and an application for Low THC at the same time.

President Azzolin inquired as to how many applications the board office has received. Mr. Lacefield responded by stating that 27 applications have been entered.

Discussion was held regarding the letter sent by the board office to the applicants stating to contact the DEA if the pharmacy plans to handle controlled substances. Mr. Stone stated that it is Georgia law and suggested the language be removed from the letters for Low THC applications. Director Troughton commented that it is not a requirement for an applicant for a Low THC pharmacy dispensary specialty permit to have a DEA number. The Board agreed to remove the language from the template.

Attorney General’s Report – Mr. Max Changus

Mr. Changus introduced Mr. Justin Cotton to the Board.

Executive Director’s Report – Mr. Eric Lacefield

Low THC Rules: Mr. Lacefield reported that the Low THC rules became effective October 4, 2023. The board office has entered a total of 27 applications.

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

Date of Program	Hours	Sponsoring Group	Program Title	CE Code
10/26/2023	1	Kaiser Permanente	Deep Dive into Preceptor Qualifications	2023-0011

Legal Services – Mr. Clint Joiner

Discussion of Remaining PBM Licenses: Mr. Joiner stated that the Board of Pharmacy no longer regulates PBM’s. He further stated that there are two (2) active PBM’s that have renewed thru 2025. He inquired as to how the Board would like to handle the situation. Mr. Joiner explained that the PBM’s do not need to be renewed. Discussion was held regarding refunding the renewal fee. Mr. Lacefield stated that if the renewal was done online, the renewal fee could be refunded easily.

Mr. Changus stated that it seemed appropriate to send a letter to the two (2) PBM’s stating that the license has been rescinded by operation of law and the renewal fee is being returned.

Miscellaneous

2024 Proposed Meeting Dates: The Board discussed conflicts and alternative dates. Mr. Brinson made a motion to adopt the 2024 meeting dates as amended. Mr. Stone seconded, and the Board voted unanimously in favor of the motion.

Caron Treatment Center-Atlanta: Vice-President Page made a motion to approve Caron Treatment Center-Atlanta as a board approved treatment facility. Mr. Brinson seconded, and the Board voted unanimously in favor of the motion.

Immunization Protocol/RSV Vaccination: Mr. Stone stated that in July the Advisory Committee on Immunization Practices (ACIP) met and came up with recommendations for RSV. He explained that it was settled now, but felt the Board would need to discuss in the future as he has started receiving phone calls about what the law states. He stated that O.C.G.A. § 43-34-26.1(a)(9) states the following:

(9) “Vaccine” means:

- (A) A vaccine that is included on the adult immunization schedule recommended by the Advisory Committee on Immunization Practices (ACIP) of the federal Centers for Disease Control and Prevention administered to an individual 18 years of age or older;

- (B) An influenza vaccine administered to an individual 13 years of age or older; and
- (C) Any vaccine administered to an individual 13 years of age or older for an illness that has resulted in a public health emergency, as defined in Code Section 31-12-1.1.

Mr. Stone stated that the law states it is recommended, but he was unclear about the adult immunization schedule. He further stated that if ACIP recommends it, then it is good to go. He added that the schedule is updated a couple times a year, which caused confusion. He explained that nobody can do it until its printed on the schedule and it is updated.

President Azzolin stated that he has had people from the Department of Public Health reach out with the same question because the schedule does not compliment what ACIP has listed. Mr. Chang stated that, based on law, it has to be on table. He further stated that they have been receiving complaints from providers asking why it is not being given. He added that there is confusion amongst providers and pharmacies.

Mr. Changus inquired if RSV was not on the schedule currently. Mr. Chang responded by stating that it is not on the adult schedule, but it is listed in the appendix. Mr. Changus asked if the appendix is an appendix to the schedule itself. The Board answered affirmatively. Mr. Changus stated that if there has been any intent from the CDC to add this and it has done so in an appendix, that is sufficient.

President Azzolin commented by stating that was fine for RSV, but inquired as to what happens with the next thing that comes up if it does not show up on the schedule but twice a year. Mr. Changus responded by stating that the limitations in the statute say it has to be on the schedule. He stated that if you cannot make an argument via the appendix saying it is not on the schedule you cannot do it.

After further discussion, the Board recommended adding a statement to its website stating to “Please be advised this vaccine has been added in the appendix to the schedule identified in 43-34-26.1 and is available for administration.”

Rules Discussion

Rule 480-36-.01 Definitions: President Azzolin stated that there are things the Board may need to address and probably should not vote on the proposed rule today because there are discussions the Board needs to have in Executive Session and at the work session in November. He stated that the Board may modify or approve the proposed language as is. President Azzolin read the following suggested change:

- (4) Secondary remote entry pharmacist. A secondary remote entry pharmacist shall be defined as a pharmacist licensed in this state and located anywhere in the United States who performs remote prescription drug order processing but does not dispense the medication to the patient or the patient's caregiver. ~~There shall only be one secondary remote entry pharmacist to assist the primary dispensing pharmacy with remote prescription drug order processing per prescription.~~

President Azzolin explained that the proposal is to remove the last sentence completely which would allow a prescription to be processed by more than one (1) more secondary remote entry pharmacist per prescription.

Rule 480-36-.07 Notification to Patients: President Azzolin stated that this is regarding the three (3) inch lettering specifying that remote order entry processing is performed at this location. He explained that there has been feedback stating it is hard to come by a sign that big and there is not a great place to put it. He added that it does not seem to be a necessary aspect of the rule. President Azzolin explained that his idea is to strike it completely and not have any notification. Mr. Cordle stated that if the prescription shop closes a sign with the three (3) inch lettering is required. President Azzolin suggested adding this topic to the November workshop agenda.

President Azzolin stated that the Board will need to have discussion in Executive Session around other issues that may or may not touch this rule. He inquired if the Board should vote to post Rule 480-36-.07 now, or should the Board wait until November. Mr. Lacefield requested the Board consider a vote to post at its November meeting to allow time for staff to have the rule finalized.

Discussion was held regarding whether or not the Board should go into Executive Session at this point in the meeting and ask the public to return later for Open Session regarding this topic. Mr. Changus stated that looking at the issue in totality seems perfect to schedule for the work session. President Azzolin stated that time is of the essence for those models that want to use this model. Mr. Changus stated that if the Board would like to get the process going on this, he does not see the other issues connected to this. He explained that what the Board is looking at on the other stuff concerns pharmacy technicians. He added that he did not think they are intricately related enough to ask the public to come back and that the Board could proceed with voting to post. President Azzolin explained that the Board would be voting to post both Rule 480-36-.01 and Rule 480-36-.07 because if the Board votes to post on the first one, then the second rule goes away. Mr. Changus stated that it would be a deletion of Rule 480-36-.07 in its entirety.

Mr. Chang made a motion to post Rule 480-36-.01 Definitions and Rule 480-36-.07 Notification to Patients. Mr. Brinson seconded. Discussion was held by Mr. Bracewell. Mr. Bracewell stated that the Board is not notifying the public that it is using remote order entry and that keeping that from the public troubles him. He further stated that he was not opposed to remote order entry, but he was not comfortable with the Board keeping it secret from the public. He added that the Board is telling them when the pharmacy is closed, but not telling them about remote order entry processing.

Mr. Cordle responded by stating that the Board does not require the pharmacy to notify the patient who is filling those prescriptions or who is filling the prescriptions in the four (4) walls of the building. He further stated that the Board will take disciplinary action if appropriate on who is responsible for a misfill if one were to occur. Mr. Brinson responded by stating that inside those four (4) walls those people are Georgia pharmacists and in this situation, these people are not necessarily Georgia pharmacists. President Azzolin responded by stating that they are Georgia pharmacists. He stated they can be outside the state, but have to be Georgia licensed pharmacists. Mr. Bracewell explained that he is not opposed to remote. He added that he was troubled by the fact that the Board operated on this and this is a significant change. President Azzolin responded by stating that when the rule was originally written prior to the Board changing last year, it was written on the premise that you can have a secondary remote pharmacy and that secondary remote pharmacy may use a pharmacist not licensed in Georgia assisting the Primary Pharmacy and there goes the reason for having that notification. President Azzolin inquired as to why is it there in the first place. He stated that this is an arbitrary notification on what he perceives as past board's concerns about remote services when those remote services were just beginning. He added that the concern was understandable in that time and place.

Mr. Stone commented that technology has changed significantly. President Azzolin agreed and stated that because Georgia is using all licensed pharmacists to provide the remote services and not unlicensed Georgia pharmacies, it seems appropriate to not have to notify at this point because there is accountability to everyone performing remote services. There being no further comments, the Board voted in favor of the motion with the exception of Mr. Bracewell who abstained.

Rule 480-36-.01 Definitions

As used in this chapter, the following terms:

- (1) "Board" shall mean the Georgia Board of Pharmacy.
- (2) "Remote prescription drug order processing" shall mean the processing of prescription or patient information from a location other than the location from which the prescription medication is received and dispensed. It shall not include the dispensing of a drug, but may include:

- (a) Receiving the prescription order from the primary dispensing pharmacy;
 - (b) Interpreting, analyzing, or clarifying prescriptions;
 - (c) Entering prescription or patient data into a data processing system;
 - (d) Transferring prescription information;
 - (e) Performing a drug regimen review;
 - (f) Performing a drug allergy review;
 - (g) Performing therapeutic interventions; or
 - (h) Any combination of these order processing functions.
- (3) Primary dispensing pharmacy. A primary dispensing pharmacy shall be defined as the retail pharmacy located in this State from which a prescription is physically received and dispensed to the patient or the patient's caregiver.
- (4) Secondary remote entry pharmacist. A secondary remote entry pharmacist shall be defined as a pharmacist licensed in this state and located anywhere in the United States who performs remote prescription drug order processing but does not dispense the medication to the patient or the patient's caregiver. ~~There shall only be one secondary remote entry pharmacist to assist the primary dispensing pharmacy with remote prescription drug order processing per prescription.~~

Rule 480-36-.07 Notification to Patients Repealed

- (1) ~~Prior to utilizing remote prescription drug order processing, the primary dispensing pharmacy shall:~~
- ~~(a) Notify patients their prescription drug order may be processed in part by an offsite pharmacist or pharmacy. Such notification may be provided through use of a sign in the pharmacy which states: "Remote Order Processing Utilized Here." Such sign must be clear and legible with letters at least three (3) inches in size, and the sign shall be free from obstruction and visible to patients at the time the prescription is presented to the pharmacy.~~

Mr. Stone made a motion, and Mr. Brinson seconded, that the formulation and adoption of the proposed rule amendments does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule amendments cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

In the same motion, the Board also votes that it is not legal or feasible to meet the objectives of the relevant code sections to adopt or implement differing actions for businesses as listed at O.C.G.A § 50-13-4(a)(3)(A), (B), (C) and (D). The formulation and adoption of the proposed rule amendments will impact every licensee in the same manner, and each licensee is independently licensed, owned and operated and dominant in the field of pharmacy.

Mr. Brinson took a moment to recognize that October 12th was Women in Pharmacy Day and October 17th was Pharmacy Technician Day. He thanked all the pharmacy technicians for their hard work.

Mr. Brinson made a motion and Mr. Cordle 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

Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton

- P.A.

Cognizant's Report – Mr. Chuck Page

- GDNA Case # A34968
- GDNA Case # A34821
- GDNA Case # A34820
- GDNA Case # A34827
- GDNA Case # A34929
- GDNA Case # A34860
- GDNA Case # A34913
- GDNA Case # A34960
- GDNA Case # A34887
- GDNA Case # A34978
- GDNA Case # A34800
- GDNA Case # B34895
- GDNA Case # B34900

Attorney General's Report – Mr. Max Changus

Mr. Changus presented the following consent orders for acceptance:

- W.P.G.
- M.C.P.

The Board received legal advice regarding Rules 480-6-.01 Pharmacy Licenses, 480-6-.02 Nonresident Pharmacy Permit, 480-7-.01 Manufacturer's Permit, 480-7-.03 Drug Wholesale Distribution Licensing Requirements, 480-7-.04 Researcher's Permit, 480-7A-.04 Requirements for Licensure as a Listed Chemical Wholesale Distributor, 480-8-.02 Registration, 480-10-.06 Licensure, Application, and Display of License and Renewal Certificate, 480-13-.02 Licensure and Registration, 480-18-.02 Licensure and Registration, 480-33-.02 Licensure and Registration, 480-52-.07 Licensure, Application, and Display of License and Renewal Certificate, and 480-15-.03 Use of Registered Pharmacy Technicians and Other Pharmacy Personnel.

Executive Director's Report – Mr. Eric Lacefield

No report.

Legal Services – Mr. Clint Joiner

No report.

Applications

- K.M.R.
- S.M.A.
- E.C.H.
- B.D.G.
- K.K.D.
- M.R.M.
- J.J.S.
- Z.H.
- O.C.M.
- A.M.J.
- E.S.R.
- J.J.
- R.D.L.

- O.O.
- D.B.L.
- A.Y.
- H.N.D.
- J.E.J.
- K.G.H.
- A.L.I.
- A.L.I.
- A.L.I.
- A.R.
- T.P.U.
- T.P.U.
- L.G.E.I.
- J.

Correspondences/Requests

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

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

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

Georgia Drugs and Narcotics Agency – Mr. Dennis Troughton

- P.A. Third Party Distributor Table pending receipt of additional information

Cognizant’s Report – Mr. Chuck Page

- GDNA Case # A34968 Accept Private Interim Consent Order
- GDNA Case # A34821 Refer to the Department of Law
- GDNA Case # A34820 Refer to the Department of Law
- GDNA Case # A34827 Refer to the Department of Law
- GDNA Case # A34929 Close with Letter of Concern
- GDNA Case # A34860 Schedule Investigative Interview
- GDNA Case # A34913 Null and Void permit
- GDNA Case # A34960 Refer to the Department of Law
- GDNA Case # A34887 Refer to the Department of Law
- GDNA Case # A34978 Refer to the Department of Law
- GDNA Case # A34800 Refer to the Department of Law
- GDNA Case # B34895 Misfill Guidance #1A
- GDNA Case # B34900 Misfill Guidance #2A

Attorney General’s Report – Mr. Max Changus

Mr. Changus presented the following consent orders for acceptance:

- W.P.G. Private Consent Order accepted
- M.C.P. Private Consent Order accepted

The Board received legal advice regarding Rules 480-6-.01 Pharmacy Licenses, 480-6-.02 Nonresident Pharmacy Permit, 480-7-.01 Manufacturer’s Permit, 480-7-.03 Drug Wholesale Distribution Licensing Requirements, 480-7-.04 Researcher’s Permit, 480-7A-.04 Requirements for Licensure as a Listed Chemical Wholesale Distributor, 480-8-.02 Registration, 480-10-.06 Licensure, Application, and Display of License and Renewal Certificate, 480-13-.02 Licensure and Registration, 480-18-.02 Licensure and Registration, 480-33-.02 Licensure and Registration, 480-52-.07 Licensure, Application, and Display of License and Renewal Certificate, and 480-15-.03 Use of Registered Pharmacy Technicians and Other Pharmacy Personnel.

Executive Director’s Report – Mr. Eric Lacefield

No report.

Legal Services – Mr. Clint Joiner

No report.

Applications

- K.M.R. Pharmacy Technician Approved for registration
- S.M.A. Pharmacy Technician Approved for registration
- E.C.H. Pharmacy Technician Approved for registration
- B.D.G. Pharmacy Technician Table pending receipt of additional information

- K.K.D. Pharmacy Technician Approved for registration

• M.R.M.	Pharmacy Technician	Approved for registration
• J.J.S.	Pharmacy Technician	Table pending receipt of additional information
• Z.H.	Request for Reinstatement	Denied request
• O.C.M.	Pharmacist Intern	Approved application
• A.M.J.	Pharmacist Intern	Table pending receipt of additional information
• E.S.R.	Pharmacist Intern	Approved application
• J.J.	Nuclear Pharmacist	Approved application
• R.D.L.	Pharmacist Reciprocity	Approved application
• O.O.	Pharmacist Reinstatement	Approved application
• D.B.L.	Pharmacist Reinstatement	Refer to the Department of Law
• A.Y.	Pharmacist Certification of DTM	Approved application
• H.N.D.	Pharmacist Certification of DTM	Approved application
• J.E.J.	Pharmacist Certification of DTM	Approved application
• K.G.H.	Pharmacist Certification of DTM	Approved application
• A.L.I.	Wholesaler Pharmacy	Approved for renewal
• A.L.I.	Wholesaler Pharmacy	Approved for renewal
• A.L.I.	Wholesaler Pharmacy	Approved for renewal
• A.R.	Wholesaler Pharmacy	Approved for renewal
• T.P.U.	Wholesaler Pharmacy	Approved for renewal
• T.P.U.	Wholesaler Pharmacy	Approved for renewal
• L.G.E.I.	Wholesaler Pharmacy	Approved for renewal
• J.	Durable Medical Equipment Suppliers	Approved application

Correspondences/Requests

• S.P.I.	Notice of Discipline	No action
• V.C.P.	Notice of Discipline	No action
• C.P.G.	Notice of Discipline	No action
• A.C.S.	Notice of Discipline	No action
• A.A.	Notice of Discipline	Refer to the Department of Law
• E.I.	Notice of Discipline	No action
• I.R.	Notice of Discipline	No action
• O.O.I.	Notice of Discipline	No action
• O.P.	Notice of Discipline	No action
• S.P.S.I.	Notice of Discipline	No action
• W.P.N.	Notice of Discipline	No action
• W.P.N.	Notice of Discipline	No action
• B.D.R.	Notice of Discipline	No action
• B.T.R.	Notice of Discipline	No action
• G.H.	Lockbox Request	Approved request
• G.H.	Lockbox Request	Table pending receipt of additional information
• C.M.C.	Appearance Request	Table pending receipt of additional information
• N.L.F.	Appearance Request	Approved request
• J.W.R.	Appearance Request	Approved request
• A.J.P.	Request for 4 th attempt to retake NAPLEX	Approved request

- | | | |
|-----------------------|---|---|
| • F.S.E. | Request for 5 th attempt to retake NAPLEX | Approved request |
| • P.J.W. | Request for 5 th attempt to retake NAPLEX | Approved request |
| • J.L. | Request for extension of intern license | Approved request through 12/31/2026 |
| • L.A.S. | Request for extension of intern license | Approved request through 06/30/2024 |
| • D.J.R. | Request regarding lapsed pharmacy technician registration | Board directed staff to notify individual that they must reapply. |
| • J.B.S. | Request to terminate probation | Approved request |
| • D.P.I.C. | Request for waiver of reinstatement fees | Denied request |
| • S.F.H.P.C./T.B.C.P. | Remote order entry | Approved request |

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

Miscellaneous

Correspondence from Kathleen Snella, South University School of Pharmacy: Mr. Lacefield discussed this request for a board member to speak to Class of 2024 students at a seminar to be held in December. Mr. Brinson responded by stating he could attend depending on the time of the seminar. The Board directed staff to inquire as to the time of the seminar.

Live Streaming of Board Meetings: President Azzolin requested a way for the Open Session portion of meetings be live streamed so pharmacists can watch in real time or watch a recorded version after the fact. He stated that the Board could discuss this further at its November meeting. Mr. Lacefield responded by stating that recording the meeting would be easier than live streaming. He continued by stating that minutes from each meeting are posted on the Board’s website. President Azzolin stated that minutes are not approved and posted until after the following meeting. Mr. Lacefield responded by stating that he would look into what technology would allow for such.

June 2024 Meeting: Mr. Stone discussed the possibility of holding the June 2024 meeting at the GPhA meeting. Mr. Lacefield responded by stating that he would have to look into whether or not out of state travel for staff would be permitted.

There being no further business to discuss, the meeting was adjourned at 2:02 p.m.

The next scheduled meeting of the Georgia Board of Pharmacy will be held on Wednesday, November 15, 2023, at 9:00 a.m. at 2 MLK Jr., Drive, SE, 11th Floor, East Tower, Atlanta, GA 30334.

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