GEORGIA STATE BOARD OF PHARMACY

MANUAL OF BOARD POLICIES

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Board Policy 1

Guidelines for Administratively Approving Initial Applications

Applications will be approved administratively once all criteria as outlined in the law and Board rules have been met. The administrative processing of licenses means that the Board staff has reviewed the documents and approved licensure based upon the laws, rules and board policies that pertain to that specific type of licensure. License reinstatements will be administratively processed in compliance with the Board's current Reinstatement/Reactivation Policy. The Board will review any applicant with an affirmative answer to the conviction or Board sanction questions. Administratively issued licenses are considered for a vote to ratify at the next regularly scheduled board meeting.

Adopted: September 15, 1998

Amended: May 13, 2003

Reviewed: April 22, 2026

Board Policy 2

Guidelines for Reinstatement/Reactivation of Pharmacists' Licenses who have NOT been actively practicing pharmacy for the past four (4) years or longer.

(This pertains to a pharmacist whose license is on "Inactive" status or administratively lapsed due to non-renewal, voluntarily suspended for disciplinary reasons.) The applicant must complete the following:

1. All applicants must submit the completed application to the Board's office for reinstatement/reactivation.
2. At the Board's discretion, the applicant may be required to re-take and achieve a passing score on the Jurisprudence Examination (MPJE).
3. Complete and submit proof of 30 hours of Pharmaceutical Continuing Education.

Once the above conditions have been met, the Board staff will forward the file to the Attorney General's office for issuance of a consent order requiring:

1. Applicants who have been out of practice four (4) or more years will be required to work under direct supervision for 500 hours.

An applicant can work a minimum of twenty (20) hours and maximum of fifty (50) hours per week. At the completion of this practice, the supervisor must provide an affidavit attesting to the applicant's level of competency.

2. Applicants may choose and retake and pass the NAPLEX in lieu of working the total number of hours required above.

In its discretion, the Board may require one or all the following: Applicants who have been out of practice for over ten (10) years may be required to re-take and achieve a passing score on the NAPLEX.

1. Submit further evidence of competency or stipulations as may be determined by the Board.
2. Board may request to meet with licensee prior to the license being reinstated.

Amended: February 12, 2025

Reviewed: April 22, 2026

Board Policy 3

Guidelines for Reinstatement/Reactivation of Pharmacists' Licenses who HAVE been actively practicing pharmacy during the past four (4) years.

(This could pertain to a pharmacist whose license is on "Inactive" status, or a pharmacist whose license was administratively lapsed due to non-renewal, voluntarily surrendered or suspended for disciplinary reasons.)

1. All applicants must submit an application to the Board's office for reinstatement/reactivation.
2. Complete and submit proof of 30 hours of Pharmaceutical Continuing Education obtained during the past two (2) years.
3. Submit a Curriculum Vitae (CV) indicating past work activities going back to date of expiration.
4. If licensed in another state, have verification of licensure forwarded to the Georgia Board of Pharmacy's office.

If the license was administratively lapsed due to non-renewal, the Board, in its discretion may also require one or all of the following:

1. Inclusion in the CE audit pool for the upcoming renewal cycle.
2. Board may request to meet with licensee prior to the license being reinstated.

Amended: February 12, 2025

Reviewed: April 22, 2026

Board Policy 4

Guidelines for Reinstatement of Pharmacists' Licenses and Pharmacy Technician Registrations that have been Administratively Lapsed for Failure to Renew.

It is the Board's Policy that licenses and registrations that have been administratively Lapsed due to nonrenewal shall be reinstated in the manner prescribed below:

1. Pay a reinstatement fee. Current fees may be found on the approved fee schedule.
2. Board may request to meet with licensee/registrant prior to license/registration being renewed.
3. Pharmacist applicants must also follow the requirements of Policy 2 if applicant has not been actively practicing pharmacy for the past four (4) years or longer.

Adopted: November 17, 1998

Amended: February 12, 2008

Amended: February 12, 2025

Amended: December 17, 2025

Reviewed: April 22, 2026

Board Policy 5

Guidelines for C.E. Audits: Non-Compliance

If a pharmacist is randomly selected for a Continuing Education Audit and does not provide proof of the required 30 hours of C.E. for the biennium, the pharmacist will need to comply with the following in order to late renew or reinstate the license:

1. The pharmacist must obtain two (2) C.E. credit hours for everyone (1) C.E. credit hour he/she is deficient.
2. In the discretion of the Board, the pharmacist may be subject to a C.E. deficiency fee of $50.00 per deficient hour, not to exceed a maximum of $500.00.

The pharmacist may not use the additional required hours in the present or next biennium. The hours are to comply with the past renewal biennium and may not be counted again.

Adopted: November 17, 1998

Amended: May 13, 2003

Amended: February 12, 2025

Reviewed: April 22, 2026

Board Policy 6

No-Show Policy

Anyone who does not appear before the Board for his or her scheduled appointment without a valid reason, upon reapplying, will have a six (6) month waiting period.

Adopted: July 22, 2002

Amended: May 13, 2003

Amended: February 12, 2025

Reviewed: April 22, 2026

Board Policy 7

Opioid Treatment Program Clinic Pharmacy Policy Regarding Take-Home Medication

** This policy applies ONLY to Opioid Treatment Program ("OTP") Clinic Pharmacies. In no way should any portion of this policy be construed to apply to any other type of pharmacy permit issued by the Georgia State Board of Pharmacy ("Board"). **

The Director of Pharmacy Services of an OTP clinic pharmacy shall provide each patient with a pre-printed agent authorization form or document. By signing this document, each patient will be able to authorize one or more licensed health care professional who is/are employed by the OTP to be his or her authorized agent. A patient must sign and date a separate document naming each licensed health care profession the patient authorizes to be his or her agent. A patient can only authorize a health care professional who is authorized by state law to administer medication.

The take-home medication must have been previously prepared at the OTP by a pharmacist. The take-home medications for each patient must be labeled in accordance with all federal and state laws and regulations. Each patient's set of take-home medications must be maintained together in a package bearing the name of and other necessary information required to identify the patient.

The OTP Director of Pharmacy must maintain a set of Policy and Procedures describing the procedure by which patients authorize an agent to deliver their take-home medications to them, and describing how patients obtain their take-home medications from their agent. This procedure must include at a minimum, but is not limited to:

- Details on how a patient's take-home medications are transferred from the pharmacist to the patient's authorized agent,
- How a patient authorizes their agents by use of an agent designation form
- How each authorized agent receives training from the pharmacist on receiving and delivering take-home medications to patients.
- The names of all persons who are authorized to access the safe containing take-home medications,
- What action is to be taken when a change is made in patient's take-home medications,
- The record keeping involved in all phases of this procedure, and
- How the take-home medications are delivered to the patient.

Once each patient's container of take-home medications has been transferred from the pharmacist to a patient's authorized agent, the container cannot be stored in the pharmacy area safe. The patient's authorized agent must secure each patient's container of take-home medications in a safe located outside of the pharmacy area. All safes and security systems in use to store a patient's take-home medications must meet the minimum requirements set forth in U.S. Drug Enforcement Administration (DEA) and U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) rules and laws.

The OTP Director of Pharmacy shall maintain a signed log and record detailing the quantity of the take-home medication prepared and dispensed for each patient, the signature of the patient's

authorized agent who received the take-home medication, and the signature of the patient when his/her medication was received from the authorized agent.

A patient's authorized agent may act as such only while on the property of the specific OTP where the patient receives his/her medication. A patient's authorized agent can only deliver take-home medications from the specific OTP where the patient receives his/her medication. The patient's authorized agent my not leave the OTP premises with any patient's take-home medication, nor shall a patient's take-home medication be delivered to the patient in any manner except that authorized by DEA and SAMHSA rules and laws.

This policy is subject to any and all federal and state laws, rules and guidelines which address the delivery of take-home medications at an OTP licensed and operated in the State of Georgia.

Adopted: October 14, 2009

Reviewed: April 22, 2026

Agent Designation Form for Delivery of Take-Home Doses

I, _____, a patient at the _____ Opioid Treatment Program Clinic (OTPC), do hereby designate _____, LPN/RN, GA License Number:_____ a nurse licensed by the State of Georgia and employed at and by this treatment clinic as my agent to receive from the clinic pharmacist any and all of my prescribed OTPC take-home medication doses and maintained at this OTPC. In turn, my agent will personally deliver all such take-home doses to me only at this OTPC clinic. It is my understanding that before the delivery of such doses, each one will have been previously prepared by the pharmacist and placed in a container displaying a prescription label with my name and all of the other requirements of Pharmacy Board Rule 480-18-.06 and the rules and laws of SAMHSA and the DEA. I understand that a copy of this designation will be maintained by the OTPC pharmacy as part of my patient record, and it shall remain in effect until such time as I revoke it, or it is revoked by the OTPC pharmacy or the OTPC clinic.

Patient Signature:_____ Date:_____

(Printed Name of Patient:_____)

Agent Signature:_____ Date:_____

(Printed Name of Agent:_____)

Signature of Pharmacist:_____ Date:_____

(Printed Name of Pharmacist:_____)

Board Policy 8

Guidelines for a Change in Ownership or Change in Location

If a change of ownership or change in location is submitted during the period in which the same facilities are in renewal (push-period), the status shall go into Active-Renewal Pending status until the application is complete. In these instances, where a change of ownership or change in location application fee is submitted, it will not be necessary for the entity to pay the renewal fee.

Adopted: May 10, 2017

Amended: February 12, 2025

Reviewed: April 22, 2026

Board Policy 9

Initial Approval and Periodic Review of Board-Approved Treatment Providers

This policy outlines the approval process for the initial recognition and periodic review of facilities, organizations, or individuals seeking designation as Board-approved treatment providers for Georgia-licensed Pharmacists or Pharmacy Technicians diagnosed with, or suspected of having, substance use disorders or mental health disorders.

The process outlined herein shall be applicable and available only to such facilities, organizations, or individuals located in the State of Georgia, or another United States jurisdiction. Foreign/international entities must contact the Board for details on the approval process for such entities.

Approval Process

Entities seeking designation as a Board-approved treatment provider shall submit an application based upon their organization type: Either an "Individual Provider or Small Group Provider Application" or an "Organization or Institution Application." Applications shall be submitted electronically to the Georgia State Board of Pharmacy by email to pharmacyboard@dch.ga.gov.

Entities with multiple practice locations shall submit a separate application form for each such location from which it intends to provide Board-approved services.

Applications will be reviewed by the Board during the public session of the next meeting of the Board. In no event shall the Board review any application less than 15 days after receipt of same.

Applicants shall be notified of the Board's decision in writing, and approved treatment providers shall be listed as such on the Board's website inclusive of the date of expiration of such approval. Treatment providers are approved for a period of two years from the date of the written notice of approval.

Treatment providers approved by the Board must remain so approved during the entire treatment period of and Pharmacist or Pharmacy Technician. Evaluations or progress reports from providers whose Board approvals have expired may be rejected by the Board, even in the case where such provider was Board-approved at the time such treatment was initiated.

Adopted: December 17, 2025

Reviewed: April 22, 2026

Board Policy 10

Authorization for Simultaneous Operation of Licenses for Pharmacy Facilities Undergoing Change in Ownership

Georgia-licensed pharmacy facilities that have applied for a change of ownership may request authorization to simultaneously operate the old and the new license for a period of time not to exceed sixty (60) calendar days immediately following the closure of the transaction effectuating the change of ownership.

Authorization for simultaneous operation shall only be granted to applicants who have otherwise, at all times, complied with the Board's rules governing the application process for facilities undergoing a change of ownership, inclusive of timeliness and deadlines.

Authorization for simultaneous operation shall only be granted to applicants whose applications have been approved by the Board prior to the closure of the transaction effectuating the change of ownership.

Any authorization granted pursuant to this policy shall be considered a discretionary privilege, and not a right. The Board may refuse to grant or may revoke such authorization at its discretion, for any reason. Revocation of such privilege shall be effective upon mailing of written notice to the applicant at the mailing or physical address stated in its application. Denial or revocation of said privilege shall not be considered a contested case under Chapter 13 of Title 50, the "Georgia Administrative Procedure Act," but said applicant shall be entitled to an appearance before the board.

Adopted: April 22, 2026

Reviewed: April 22, 2026

Board Policy 11

Authorization for Dual Location of License for Pharmacy Facilities Undergoing Change in Location

Georgia-licensed pharmacy facilities that have applied for a change of location may request that the Board extend the physical bounds of their license to simultaneously cover the location from which they are moving and the location to which they are moving for a period of time not to exceed thirty (30) calendar days.

Authorization for dual location shall only be granted to applicants who have otherwise, at all times, complied with the Board's rules governing the application process for facilities undergoing a change of location, inclusive of timeliness and deadlines.

Authorization for dual location shall only be granted to applicants whose applications have been approved by the Board prior to the applicant transporting and storing drugs at the new location, or otherwise beginning to operate as a pharmacy facility in the new location.

Any authorization granted pursuant to this policy shall be considered a discretionary privilege, and not a right. The Board may refuse to grant or may revoke such authorization at its discretion, for any reason. Revocation of such privilege shall be effective upon mailing of written notice to the applicant at the mailing or physical address stated in its application. Denial or revocation of said privilege shall not be considered a contested case under Chapter 13 of Title 50, the "Georgia Administrative Procedure Act," but said applicant shall be entitled to an appearance before the board.

Adopted: April 22, 2026

Reviewed: April 22, 2026

Board Policy 12

Timing of Pharmacy Facility Inspections by the Georgia Drugs and Narcotics Agency

All pharmacy facilities licensed by the Georgia State Board of Pharmacy and subject by law or rule to regular inspection shall be so inspected not less frequently than once every 18 months.

This policy shall apply only to those such facilities located in the State of Georgia.

Adopted: December 17, 2025

Reviewed: April 22, 2026

Board Policy 14

Public Emergencies

Section 1. Purpose and Scope

The primary purpose of this policy is to enable pharmacists and pharmacies to assist in the management and containment of a public emergency or similar crisis within the confines of a regulatory framework that serves to protect the welfare and health of the public. The Board will consider petitions for rule waivers or variances regarding recordkeeping, minimum physical area, and minimal equipment requirements related to the state of emergency in the declared disaster areas and affected areas on an emergency basis, pursuant to a written request in a manner consistent with the Board's authority under state law and/or the Governor's State of Emergency.

Section 2. Definitions

For the purposes of this policy, the following definitions apply:

(1) "Affected Areas" include areas covered by the state of emergency.
(2) "Declared Disaster Areas" are areas designated by state or federal authorities as those that have been adversely affected by a natural or man-made disaster and require extraordinary measures to provide adequate, safe, and effective health care for the affected population.
(3) "Mobile Pharmacy" means a pharmacy that is self-propelled or movable by another vehicle that is self-propelled.
(4) "State of Emergency" means a governmental declaration issued by the Governor of the State of Georgia or the President of the United States which may suspend certain normal functions of government, alert citizens to alter their normal behaviors, and/or direct government agencies to implement emergency preparedness plans.
(5) "Temporary Pharmacy Facility" means a facility established as a result of a state of emergency to temporarily provide pharmacy services within or adjacent to declared disaster areas.

Section 3. Emergency Refill Dispensing

(1) For the duration of the state of emergency issued in the affected area and consistent with O.C.G.A. §26-4-80(j), a pharmacist may dispense a 72-hour refill supply of a prescription drug repeatedly to a patient, but in total not more than a thirty (30) day supply, without practitioner authorization if:
    (a) The refill is not for a controlled substance;
    (b) In the pharmacist's professional judgment, the prescription drug is essential to the maintenance of the patient's life or to the continuation of therapy;
    (c) The pharmacist makes a good faith effort to reduce the information to a form that may be maintained for the time required by law or rule, indicates it is an "emergency refill prescription," and maintains the record as required by state and federal law and as required by state and federal disaster agencies for consideration for possible reimbursement programs implemented to ensure continued provision of care during a disaster or emergency;

(d) The pharmacist informs the patient or the patient's agent at the time of dispensing that the prescription drug is being provided without the practitioner's authorization and that authorization of the practitioner is required for future refills; and
(e) When emergency conditions permit, the pharmacist notifies the practitioner that the refill occurred.

Section 4. Temporary Recognition of Non-Resident Licensure

(1) When a state of emergency is declared and consistent with O.C.G.A. §26-4-43:
   (a) A pharmacist not licensed in this state, but currently licensed in another state, may obtain a temporary license to dispense prescription drugs in areas affected by the declared disaster during the time that the state of emergency exists if:
      1. The Board can verify current licensure in good standing of the pharmacist directly with the state or indirectly via a third-party verification system; and
      2. The pharmacist is engaged in a documented relief effort.
   (b) A pharmacy technician or pharmacy intern not registered or licensed in this State, but currently registered or licensed in another state, may assist the pharmacist in dispensing prescription drugs in affected disaster areas during the time that the state of emergency exists if:
      1. The Board can verify current registration or licensure in good standing of the pharmacy technician or pharmacy intern directly with the state or indirectly via a third-party verification system; and
      2. The pharmacy technician or pharmacy intern is engaged in a documented relief effort.
(2) The temporary recognition of non-resident pharmacist licensure and pharmacy intern licensure shall cease at end of the month following the third board meeting conducted after the issuance of such license and shall not be renewed. The temporary recognition of non-resident pharmacy technician registration shall registration shall cease with the termination of the state of emergency.

Section 5. Temporary Pharmacy Facilities or Mobile Pharmacies

(1) Consistent with the authority in O.C.G.A. §26-4-110, and if necessary to provide pharmacy services during a state of emergency, pharmacies located in declared disaster areas and non-resident pharmacies may arrange to temporarily locate or relocate to a temporary pharmacy facility or mobile pharmacy if the temporary pharmacy facility or mobile pharmacy:
   (a) Is under the control and management of the pharmacist-in charge or designated supervising pharmacist;
   (b) Is located within the declared disaster area or affected areas;
   (c) Notifies the Board of its location, subject to approval by the Board in accordance with subsection (2), below;
   (d) Is properly secured to prevent theft and diversion of drugs;
   (e) Maintains records in accordance with laws and regulations of the state in which the disaster occurred; and

(f) Ceases the provision of services with the termination of the state of emergency, unless it is successfully licensed by the Board of Pharmacy in accordance with the Georgia Pharmacy Practice Act and applicable rules.

(2) The Board shall have the authority to approve or disapprove temporary pharmacy facilities and mobile pharmacies and shall make arrangements for appropriate monitoring and inspection of the temporary pharmacy facilities and mobile pharmacies on a case-by-case basis. Approval of temporary pharmacy facilities and mobile pharmacies will be based on the need, type, and scope of the state of emergency, as well as the ability of the temporary pharmacy facilities or mobile pharmacies to comply with state and federal drug law.

(3) A temporary pharmacy facility wishing to permanently operate at its temporary site must be licensed by the Board in accordance with the Georgia Pharmacy Practice Act and applicable Board rules.

(4) Mobile pharmacies, placed in operation during a state of emergency, may not operate permanently, unless approved by the Board.

Adopted: February 12, 2025

Reviewed: April 22, 2026