GEORGIA BOARD OF PHARMACY
Board Meeting
2 Peachtree Street, NW, 36th Floor
Atlanta, GA 30303
February 8, 2017
9:00 a.m.

The following Board members were present:
Chris Jones, President
Bob Warnock, Vice-President
Vicki Arnold
Jim Bracewell
Mike Faulk
Lisa Harris
Laird Miller
Bill Prather

Staff present:
Tanja Battle, Executive Director
Rick Allen, Director, GDNA *(departed @ 11:30 a.m.)*
Dennis Troughton, Dep. Dir, GDNA *(arrived @ 11:32 a.m.)*
Emily Gardner, GDNA
Janet Wray, Senior Assistant Attorney General
Max Changus, Assistant Attorney General
Anil Foreman, Attorney
Brandi Howell, Business Support Analyst I

Visitors:
Robin Polite
Paula Wright
Robin Elliott
Chris Entrekin-Falk
Melanie Chafin
L. David Carver, Curant Health
Michelle Pasqualetti
Brian Dalton, Premier Kids Care
Kimberly Ramseur, Medical Association of Georgia
Stephen Georgeson, GACDS
Toni Bowen, Genoa
Waqas Gill, UGA-COP
John Fullard, Maximum Rx Credit
Stacy Burke, Publix
John Lovelace, Grady Health System
Dan McCall, Cactus Smartsink
Shawn Canterbury
Greg Reybold, GPhA
Kim Hazelwood, DPH
Megan Freeman, GSHP
Cecil Cordle, CVS Health
Carris Moss, Bendin Sumrall & Ladner

President Jones established that a quorum was present and called the meeting to order at 9:05 a.m.

Jim Bracewell made a motion and Mike Faulk seconded, and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. § 43-1-19(h)(2) and §43-1-2(k) 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 Vicki Arnold, Jim Bracewell, Mike Faulk, Lisa Harris, Chris Jones, Laird Miller, Bill Prather and Bob Warnock.

Executive Session

Georgia Drugs and Narcotics Agency – Rick Allen

- R.A.I.P.
- Q.L.
- Q.L.

Attorney General's Report – Janet Wray

Ms. Wray presented the following consent orders:

- R.L.
- T.H.

Ms. Wray discussed the following cases:

- P.P.S.
- E.L./G.C.P.I.
- W.T.
- T.M.
- J.W.
- K.S.

Appearances

- R.M.P.
- R.M.E.
- C.H.F.

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

Public Hearing

President Jones called the public hearing to order at 11:39 a.m.

Rule 480-49-.03 Bad Checks and Reversals.

No comments or written responses were received. Lisa Harris made a motion to adopt Rule 480-49-.03 Bad Checks and Reversals. Vicki Arnold seconded and Board voted unanimously in favor of the motion.

Rule 480-7-.05 Reverse Distributors.

Public comments were received from John Lovelace, Grady Memorial Hospital. Mr. Lovelace stated that the rule requires that a facility have an inventory if it receives or removes pharmaceuticals. He noted that for collection receptacles, this is acceptable if coming from a long-term care facility or from the Sheriff's Department, but if the collection receptacles are coming from pharmacies, employees are not allowed to look in the box or inventory the drugs. He noted that any time a reverse distributor receives a sealed inner liner from a pharmacy, there would not be an inventory.

Vice-President Warnock responded that the reverse distributor would take the inner liner without an inventory in the box. Ms. Wray clarified that Mr. Lovelace was speaking of DEA boxes, which are not inventoried. Mr. Lovelace stated that they cannot be inventory if they are coming out of the pharmacy. President Jones asked about the patient return boxes that are sitting outside. Mr. Lovelace said that they are not allowed to look at the inner liner. Ms. Wray asked whether common carriers were coming to pick up the materials. President Jones asked about sterile cycles or sharps containers. Mr. Miller noted that they can be shipped. Mr. John Fullard of Maximum Rx Credit stated that it depends on the settings. He

stated that a collection from the public is not inventoried. If placed in nursing homes or places where they do inventory before disposed, they could send a copy, mail back part, and contract with UPS or FedEx to ship that.

Ms. Wray asked about when someone comes to pick up the content of the boxes. Mr. Fullard stated that someone could use the common carrier UPS or FedEx. Ms. Wray stated that the subparagraph only applies to those using a common carrier, which is why she asked who picks up the material. Mr. Fullard said a common carrier. Ms. Wray asked if they could get a permit to pick up the materials under federal law. Ms. Wray stated that if the company is delivering the material by itself, the provision does not apply. She stated that section (e)(2) reads, "a complete inventory of drugs received by the Reverse Distributor." Mr. Miller described a situation where there were two people and where they sealed the bag and put it in a shipping container. The two individuals that have signed off on it seal it off, but do not inventory the material as the reverse distributor completes the inventory upon receipt.

Mr. Shawn Canterbury, Inmark, stated that the issue may be between Take Back Programs and reverse distributors. He stated that if the material comes from the Take Back Program, it needs to be in a sealed container, and there would be no inventory of the products. He stated that these are two different concerns. Ms. Wray stated that the Board needs to review the "take back" rules to determine what they clearly state or if the Board needs to amend the rule to reflect the requirements of the Take Back Program. Mr. Canterbury asked if a majority of states do not require physical on-site inventory. Ms. Wray stated that states require an inventory of drugs received. She further stated that if a facility uses a common carrier, the reverse distributor must inventory what is received. Ms. Wray stated that this is consistent with everything but the Take Back Program. President Jones stated that the rule applies to reverse distributors. He advised proceeding with the rule and then reviewing the Take Back Program.

No written responses were received.

Laird Miller made a motion to adopt Rule 480-7-.05 Reverse Distributors. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Rule 480-10-.02 Prescription Department, Requirement, Supervision, Hours Closed.

Public comments from Mr. John Rocchio, CVS Health, were received. Mr. Rocchio stated that he believed the rule to be a "good move forward." He stated that the concerns were valid and addressed, but that he had a few comments. He stated that he suggested language about drug storage on site, as situations where there are locations operating a "call center" or pharmacies providing front-end services do not fit the mold. He stated that the key issue is the pharmacist verifying all of the work. Mr. Rocchio stated that the definition of pharmacy care seems adequate, but that down the road, there will be other things added to it, such as point of care testing. He stated that he believes that if vaccination rooms or consultation rooms are out in the aisles, they are still encompassed under pharm care, but a pharmacist showing someone where to find a household product would never be construed as pharmacy care. He suggesting adding language to leave the pharmacist accountable.

Public comments from Mr. Greg Reybold, GPhA, and Mr. Steve Georgeson, GACDS, were received. Mr. Reybold thanked the Board for the work done on this, as work has been going on for over a year. He thanked the Board for being open-minded and generous with its time. Mr. Reybold spoke on behalf of GPhA and stated that it supports the rule and the Board. He stated that the rule reflects a good compromise. He stated that to Mr. Rocchio's first point, he would say that the rule is within the chapter for retail pharmacies and that, if later, there were a new business model that was licensed differently, it would be a separate issue. He restated that this rule revision has taken over a year. Mr. Georgeson stated that he echoed what Mr. Reybold said. Mr. Georgeson stated that he hoped that the Board would go ahead and adopt the rule as proposed.

Written response received from John Rocchio, CVS Health.

Vicki Arnold made a motion to adopt Rule 480-10-.02 Prescription Department, Requirement, Supervision, Hours Closed. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Rule 480-10-.18 Utilization of Unused Prescription Drugs.
No comments or written responses were received. Ms. Wray stated that the repeal of the rule was based on a repeal of the law. Bill Prather made a motion to repeal Rule 480-10-.18 Utilization of Unused Prescription Drugs. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Rule 480-48-.02 Conditions for Use of Delivery by Mail.
Public comments from John Rocchio, CVS Health, were received. He stated that the Board was doing excellent work and thanked the Board again.

Written response received from John Rocchio, CVS Health.

Jim Bracewell made a motion to adopt Rule 480-48-.02 Conditions for Use of Delivery by Mail. Bill Prather seconded and the Board voted unanimously in favor of the motion.

The hearing adjourned at 12:02 p.m.

Open Session

President Jones welcomed the visitors.

Appearance
Appearance by Dan McCall, Cactus Smartsink. Mr. McCall thanked the Board for the opportunity to speak to its members. Mr. McCall presented the Board with a handout regarding the Cactus Smartsink. He described the Cactus Smartsink as being a go-green waste alternative to a red sharps container, sink, toilet, waste bin for partially administered controlled substances. The Smart Sink makes the disposal of pharmaceutical waste safe, easy, and convenient by automatically securing waste and rendering it unusable and non-recoverable. Mr. McCall gave a demonstration as to how the product is used. Following questions asked by the Board members, Mr. McCall thanked the Board for the opportunity to present this information.

Approval of Minutes
Bill Prather made a motion to approve the Public Session minutes for the January 11, 2017 meeting. Laird Miller seconded and the Board voted unanimously in favor of the motion.

Mike Faulk made a motion to approve the Executive Session minutes for the January 11, 2017 meeting. Bill Prather seconded and the Board voted unanimously in favor of the motion.

Report of Licenses Issued
Vicki Arnold made a motion to ratify the list of licenses issued. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Adamas Pharmaceuticals
Lisa Harris made a motion to approve the rule waiver petition. Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Flexion Therapeutics, Inc.
Jim Bracewell made a motion to approve the rule waiver petition. Laird Miller seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from OTCWholesale.com
Bill Prather made a motion to deny the rule waiver petition. Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Ridgeview Institute-Monroe
Bill Prather made a motion to approve the rule waiver petition. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver from Balakrishna Vempati
Bill Prather made a motion to deny the rule waiver petition. Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

Correspondence from Douglas S. Booth
The Board viewed this correspondence for informational purposes only.

Correspondence from Terry Scarpitti
The Board considered this correspondence regarding the length of time limit specific to prescription validity for oxygen concentrators. Bob Warnock made a motion to direct staff to respond that Georgia does not have any rules/regulations pertaining to how long the prescription for a device is valid. It may depend on what the insurance company will pay for. Bill Prather seconded and the Board voted unanimously in favor of the motion.

Correspondence from Jonathan Webb
The Board considered this correspondence regarding inter-facility sell/trade of prescription drugs. Bob Warnock made a motion to direct staff to respond by stating it does not appear that it is clearly authorized under Georgia law and the Board will continue to look into this matter for further study. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Correspondence from Brad Schraut, InstyMeds Corporation
The Board considered this correspondence concerning the InstyMeds Medication Adherence System presented to the Board at its July 6, 2016 meeting. Mike Faulk made a motion to direct staff to respond by stating the Board would like to clarify that the information presented would be acceptable as long as the practitioner is dispensing and the system is kept in a secure location and not available for the public to access. Lisa Harris seconded and the Board voted unanimously in favor of the motion.

Correspondence from Ashley Sykes
The Board considered this correspondence regarding Rule 480-48-.03 Delivery by Pharmacy. Lisa Harris made a motion to direct staff to respond by stating that the Board states there can be additional stops on that same route as long as the package is not exchanged with a third party. Laird Miller seconded and the Board voted unanimously in favor of the motion.

Georgia Drugs and Narcotics Agency – Dennis Troughton
Deputy Director Troughton reported that he was asked to remind everyone DME/PMP bill require that a fiscal note be attached for additional resources required for processing and inspections.

Attorney General's Report – Janet Wray
No report.

Executive Director's Report – Tanja Battle

Promises and COPAC Treatment Center: Mr. Mike Long spoke to the Board in January regarding the facility's request to become an approved treatment provider. Ms. Battle reported that he has inquired as to whether or not advocates can participate via conference call. President Jones stated the answer would be no. Ms. Harris stated that Mr. Long had mentioned when the individual leaves the facility, the treatment center would arrange for the individual to meet with someone locally. She asked if this person would be the individual's advocate. Ms. Battle responded that Mr. Long has not stated anything about that as he was exploring this option first.

Rule Waiver Petition from Preferred Treatment Center, PHOP000047: Ms. Battle stated that the reason this matter is under her report is because it has been presented as a rule waiver, but a rule has not been cited in the request. She stated she was not sure how this request needed to be handled. After further discussion, Laird Miller made a motion to direct staff to respond by stating it appears the facility is requesting a waiver of the laws and rules on pharmacy access. Based on the information provided with the submission, what it has requested would not be in compliance with Board Rule 480-18-.03(d) and as such, the request has been denied. Additionally, the Board suggests the facility find a location where the dosing room and pharmacy are separate or that it modifies its current location to separate them. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Correspondence from Jeff Carlen, Southeastern Grocers: The Board considered this correspondence regarding various point of care tests. Vicki Arnold made a motion to direct staff to respond by referring Mr. Carlen to O.C.G.A. Sections §§ 26-4-50 and 43-34-24 for more information regarding this matter.

The Strategic National Stockpile (SNS): Ms. Battle reported that she, along with Ms. Harris and Vice-President Warnock, met yesterday with the Department of Public Health (DPH) regarding the National Stockpile. Ms. Battle passed out information regarding the SNS to the Board. Vice-President Warnock provided the Board with an overview of the meeting. He stated that what has been asked of the Board is DPH is in need of pharmacies that will have the ability to distribute/dispense. Vice-President Warnock stated there is a dramatic need to define places and people who can give the medications out. DPH is asking the Board to evaluate what our laws around dispensing state and is there a way to expand the number of people who could physically give the needed drugs out or even the number of people to evaluate to see if an individual is qualified to get the drug. Ms. Wray commented that the Board's record keeping rules are rules which could be suspended. She stated in the event of an emergency, our laws could be relaxed. Mr. Miller commented that there needs to be a document the Governor could use in the event of an emergency situation. Vice-President Warnock added that there also needs to be a document DPH can use as well.

Vice-President Warnock stated that DPH is pushing hard for large company headquarters to be locations of distribution as they have thousands of employees. He asked what law would need to be adjusted to allow them to give these drugs during this time. Mr. Miller responded by stating if you are restricting the need to have a pharmacist there, you will never get it done. Ms. Harris stated they need EMTs, techs, individuals that the Board can say 'yes' they can dispense. Ms. Wray responded by stating that is where the Board can go through schools as nurses can triage, medical departments, etc. Mr. Miller asked Mr. Reybold if GPhA could assist the Board with sending out a notice saying volunteers are needed. Mr. Reybold responded by stating yes, he would think that would be something the association could assist with.

President Jones requested Ms. Harris and Vice-President Warnock to draft a rule and work with Ms. Foreman to see what needs to be done in an emergency situation. Ms. Wray commented that the Board cannot adopt a rule now unless there is an emergency order and it cannot adopt a policy. She stated the Board can develop a policy. She went on to state that the extent of what the Board can do is dependent

upon that emergency order. She reminded the Board to be mindful that there are federal laws to comply with as well. Vice-President Warnock asked if he and Ms. Harris can move forward with researching to see who would be considered appropriate personnel to hand out pre-packaged meds from the stock pile. President Jones responded by stating yes. Ms. Battle stated that they discussed the Board helping with communication and sharing. She stated the Board can provide email addresses and send to PIC's. However, the applications would need to be amended to say that the email address may be shared with DPH in the event of an emergency situation. Ms. Wray responded that the Open Records Act also protects email addresses, but that information would be allowed to be shared with a branch of government. Ms. Wray stated that the Board does collect that information with the expectation it will not be shared. The Board recommended Mr. Changus further research the matter and report back to the Board.

Continuing Education Report: Ms. Battle reported that no additional programs have been approved for this time period.

Miscellaneous

Mr. Bracewell reported that the Dean of the College of Pharmacy at Mercer University will be retiring and requested the Board recognize his years of service. Jim Bracewell made a motion to adopt the following resolution:

On this Wednesday, the eighth day of February, 2017, be it resolved by the State of Georgia Board of Pharmacy that

Whereas the pharmacy profession is founded on the merits of our professional education programs

And Whereas Mercer University College of Pharmacy under the exceptional leadership of Dean Hewitt W. "Ted" Matthews Ph.D. has established an exemplary model of modern pharmacy education in our state,

And Whereas Dean Mathews by his personal character, integrity and vision in his for forty-four years of service at Mercer University has brought national recognition to our state and to the Mercer College of Pharmacy as one of the premiere institutions of professional education in the State of Georgia.

Therefore, be it resolved that the Georgia State Board of Pharmacy does by unanimous vote hereby expresses our profound gratitude to Dr. Ted Mathews Dean of the Mercer University College of Pharmacy for a career of devotion and a job well done for the alumni of Mercer University College of Pharmacy and the citizens of Georgia.

Bill Prather seconded and the Board voted unanimously in favor of the motion.

Jim Bracewell made a motion to post Rule 480-24-.06 Destruction of Drugs. Bill Prather seconded and the Board voted unanimously in favor of the motion.

480-24-.06 Destruction of Drugs. Amended.

(1) The following methods of destruction of controlled substances and non-controlled substances are approved by the Board for medications dispensed to patients residing in long term care facilities (nursing home or skilled nursing facility) or other facility where a consultant pharmacist's services are required under state or federal regulations:

(a) When controlled substances or non-controlled drugs are expired, discontinued from use or the patient for whom they were ordered is no longer a patient, the drugs shall be immediately removed from the active stock and inventoried by two people who shall be licensed either as a pharmacists, a nurses, or a

licensed practical nurses. The completed inventory record shall be signed and dated by these two individuals. The original inventory record shall be maintained by the facility for two years, one kept by a supervisor-level facility member and a copy shall be kept with the drugs until their final disposition. Once inventoried, these drugs can either be:

1. Placed in a collection receptacle at the facility containing a numbered secure inner-liner which has been provided by an authorized collector (retail pharmacy). One supervisor-level employee of the LTCF (e.g., charge nurse or supervisor), designated by the authorized collector, may assist in changing the collection receptacle inner liner under the supervision of one pharmacist representative for the authorized collector pharmacy.

(i) Upon removal, sealed inner liners may be stored at the LTCF for up to three business days in a securely locked, substantially constructed cabinet or a securely locked room with controlled access.

~~1. Placed in a secure storage area at the facility separated from medications with active orders. The drugs can be destroyed at the facility by the consultant pharmacist and another pharmacist, nurse, or licensed practical nurse designated by the facility. However, before~~

(ii) Before the ~~destruction~~ drugs can ~~take~~ be placed in an authorized receptacle, each drug ~~it~~ must be verified ~~that~~ and an inventory of the drug ~~has been~~ taken and recorded. The facility must maintain a written record of the destruction along with the inventory record for two years. This record shall include at a minimum the date, time, personnel involved with placing the drug in the receptacle.~~the destruction and the method of destruction~~; or

2. ~~Removed~~ Secured in a storage area at ~~from~~ the facility separated from medications with active orders. The controlled and/or non-controlled drugs and kept by the consultant pharmacist until they can be destroyed at the facility by the consultant pharmacist and another pharmacist, nurse, or licensed practical nurse designated by the facility. Non-controlled drugs may be removed from the facility and ~~are~~ returned to the vendor pharmacist for destruction. The facility licensed staff or consultant pharmacist shall make a receipt for the drugs removed.~~, and t~~The original receipt to be kept by the facility and a copy of the receipt kept by the consultant pharmacist, and a copy of the receipt kept with the returned drugs. The receipt shall reflect: the date the drugs were removed from the facility, the name of the person removing the drugs, the name and address of the pharmacy to which the drugs have been removed. Both the receipt and its copy must be maintained for two years. Before any drugs can be removed for destruction, their inventory must be verified by at least one pharmacist and one other licensed health care practitioner. Once taken to the vendor pharmacy, the drugs must be stored in a secure, location, separate from active inventory, within the pharmacy. When the drugs are destroyed, a record of the manner of disposal of the drugs must be maintained by the vendor pharmacy for two years. The disposal record shall include at a minimum, whether:

(i) The drugs are destroyed at the pharmacy, and

(I) Manner of destruction;

(II) Date and time of destruction~~;~~ or

(III) Names of at least one pharmacist and one other licensed health care practitioner witnessing the destruction; ~~or~~

~~(2) The~~ (b) Any drugs for destruction placed in an authorized receptacle and stored in secure inner liner can only be removed from the facility for disposal ~~are removed from the pharmacy~~ by transfer to a representative of a reverse distributor with a current permit issued by the Board and authorized by the DEA as a collector as follows:~~; and~~

~~(I)~~1. The date and time the numbered inner liners ~~drugs~~ were taken from the facility and the numbers of the inner liners recorded in logs, one maintained by the facility for two years and one maintained by the reverse distributor for each facility for two years ~~pharmacy;~~

~~(II)~~2. The name, Board permit number, address, and telephone number of the reverse distributor removing the drugs;

~~(III)~~3. The name and signature of the responsible person representing the reverse distributor physically removing the drugs;

~~(IV)~~4. The name and signature of the persons ~~pharmacist~~ transferring the ~~drugs~~inner-liners to the reverse distributor.
~~(2)~~(c) The following methods of on-site destruction of controlled substances are approved by the Board:
~~(a)~~1. When controlled drugs are expired, discontinued from use or the patient for whom they are ordered is no longer a patient, the medication shall be removed from the active stock immediately and inventoried and verified by two people who shall be licensed either as a pharmacist, a nurse, or a licensed practical nurse. The completed inventory record shall be signed and dated by those two individuals. An inventory form will be established by the pharmacist, which must include the following data:
~~1.~~(i) Date of discontinuance or inventory date;
~~2.~~(ii) Name of patient;
~~3.~~(iii) Name of issuing pharmacy;
~~4.~~(iv) Identifying serial numbers of the prescriptions;
~~5.~~(v) Name and strength of drug; and
~~6.~~(vi) Quantities of drugs in containers when inventoried.
~~(b)~~2. After being removed from active stock, controlled substances to be destroyed must be placed in a secure cabinet or area as identified by the consultant or vendor pharmacist.
~~(c)~~3. On-site controlled substance destruction can be as follows:
~~1.~~(i) The consultant or vendor pharmacist will notify the GDNA as to the date and time the destruction will take place at least two weeks prior to destruction at the facility. (Please note that the consultant may set up a specific schedule of destruction - an example would be the first Tuesday in each month at 10:00 a.m.)
~~2.~~(ii) ~~Three~~Two licensed professionals or law enforcement officers, one of whom must be a pharmacist, must witness the destruction of these drugs.
~~3.~~(iii) Destruction must take place within the facility.
~~4.~~(iv) Inventory of final destruction must be taken in duplicate, one copy shall be retained by the facility, and one copy shall be retained by the consultant pharmacist. The inventory shall be certified by all three witnesses present at the destruction in the following format: "We, whose signatures appear below, certify that these controlled substances have been reconciled, accounted for, and destroyed at
_____(location) on
_____(date) at _____o'clock."
_____(Signature) and
_____(Signature)
~~_____(Signature)~~
~~5.~~(v) The Board and/or the GDNA, or the DEA, may prohibit any consultant pharmacist or facility from utilizing this method.
~~(3) Methods of off site destruction as follows:~~
~~(a) When controlled substances are expired, discontinued from use or the patient for whom they are ordered is no longer a patient, the medication shall be removed from the active stock immediately and inventoried and verified by two people who shall be licensed either as a pharmacist, a nurse, or a licensed practical nurse. The completed inventory record shall be signed and dated by those two individuals. An inventory form will be established by the pharmacist, which must include the following data:~~
~~1. Date of discontinuance or inventory date;~~
~~2. Full name of patient;~~
~~3. Name of issuing pharmacy;~~
~~4. Identifying serial numbers of the prescriptions;~~
~~5. Name and strength of drug; and~~
~~6. Quantities of drugs in containers when inventoried.~~
~~(b) After being removed from active stock, controlled substances to be destroyed must be placed in a secure cabinet or area as identified by the consultant or vendor pharmacist.~~
~~(c) The drugs, along with a copy of the permanent record, can then be transferred to the vendor pharmacy by the consultant pharmacist to hold for disposal by a Board licensed reverse drug distributor or by a~~

~~GDNA Agent. The consultant pharmacist shall make a receipt for the drugs removed, and the original receipt is to be kept by the facility and a copy of the receipt kept by the consultant pharmacist, both for two years. The receipt shall reflect at a minimum:~~
~~1.The date the drugs were removed from the facility;~~
~~2. The name and signature of the consultant pharmacist removing the drugs;~~
~~3. The name and signature of the Director of Nursing witnessing the drug removal;~~
~~4. The name and address of the pharmacy to which the drugs are being removed.~~
~~(d) Once received by the pharmacy, the drugs for disposal must be stored in a secure location within the pharmacy. When disposal of the drugs takes place, a record of the disposal will be maintained by the pharmacy for two years. The type of disposal record shall be, either:~~
~~1. On a separate receipt showing the drugs for destruction were removed from the pharmacy by transfer to a Board licensed reverse distributor, showing:~~
~~(i) The date and time the drugs were taken from the pharmacy;~~
~~(ii) The name, address, telephone number and Board permit number of the reverse distribution firm taking possession of the drug;~~
~~(iii) The name and signature of the responsible person representing the reverse distributor firm and physically removing the drugs;~~
~~(iv) The name and signature of the pharmacy representative transferring possession of the drugs; and~~
~~(v) A copy of the permanent drug inventory destruction record from the facility; or~~
~~2. On the permanent record showing the drugs were destroyed by a GDNA Agent with:~~
~~(i) The signature of the GDNA Agent;~~
~~(ii) The signature of the pharmacy manager as listed on the pharmacy license; and~~
~~(iii) The date and time of the drug destruction.~~

A motion was made by Mike Faulk, seconded by Laird Miller, and the Board voted that the formulation and adoption of this rule amendment does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed amendment 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 voted 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 this rule amendment will impact every licensee in the same manner, and each licensee is independently licensed, owned and operated and dominant in the field of pharmacy.

Mike Faulk made a motion and Lisa Harris seconded, and the Board voted to enter into **Executive Session** in accordance with O.C.G.A. § 43-1-19(h)(2) and §43-1-2(k) 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 Vicki Arnold, Jim Bracewell, Mike Faulk, Lisa Harris, Chris Jones, Laird Miller, Bill Prather and Bob Warnock.

Executive Session

Appearance

- G.

Executive Director's Report – Tanja Battle

- B.B.
- H.L.

Applications

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

Cognizant's Report – Bob Warnock

- GDNA Case # T32038
- GDNA Case # B-31743
- GDNA Case # B-32025
- GDNA Case # B-32018
- GDNA Case # A-31979
- GDNA Case # B-31784
- GDNA Case # A-32067
- GDNA Case # A-31807
- GDNA Case # T-32055
- GDNA Case # A-31985
- GDNA Case # A-32020

Correspondences/Requests

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

Miscellaneous

- R.I.
- Staff asked for legal advice regarding the processing of applications.

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

Open Session

Laird Miller made a motion for the Board to take the following actions:

Georgia Drugs and Narcotics Agency – Rick Allen

• R.A.I.P.	Retail Pharmacy	Schedule to meet with the Board
• Q.L.	Non-Resident Pharmacy	Denied application
• Q.L.	Manufacturing Pharmacy	Denied application

Attorney General's Report – Janet Wray

Ms. Wray presented the following consent orders:

- R.L. Private Consent Order to be accepted and signed with express permission upon receipt of the original
- T.H. Private Consent Order to be accepted and signed with express permission upon receipt of the original

Ms. Wray discussed the following cases:

- P.P.S. Update provided
- E.L./G.C.P.I. Update provided
- W.T. No action taken
- T.M. No action taken
- J.W. No action taken
- K.S. No action taken

Appearances

• R.M.P.	Request to discuss reinstatement	No action taken
• R.M.E.	Denied Pharmacist Reciprocity	Overturn denial and refer to the Attorney General's office
• C.H.F.	Pending Pharmacy Technician	Refer to the Attorney General's office

Appearance

• G.	Retail Pharmacy	The Board directed staff to respond by stating it will allow the facility to continue to practice provided that its concerns regarding record keeping and storage of drugs are addressed.

Executive Director's Report – Tanja Battle

• B.B.	Correspondence	The Board directed staff to respond by stating, based on the information provided, the administrative functions described would be permissible. However, please note that the pharmacy technicians are not authorized to provide clinical information to Georgia patients.
• H.L.	Correspondence	Schedule to meet with the Board

Applications

• Marcus A. Hawkins	Pharmacy Technician	Approved application
• Caitlin B. Wilson	Pharmacy Technician	Approved application
• Anita M. Harrell	Pharmacy Technician	Approved application
• Dominick R. Gomillion	Pharmacy Technician	Approved application
• Brittany N. Dent	Pharmacy Technician	Approved application
• Cheri P. Bentley	Pharmacist Renewal	Approved renewal
• Irene M. Attika	Inactive Status	Approved application
• M.H.P.	Pharmacist Reinstatement	Table pending receipt of additional information
• Tristan S. Maurer	Pharmacist Reinstatement	Approved application/deny refund request
• C.P.O.	Pharmacist Reciprocity	Approved to sit for the exam
• J.L.P.	Pharmacist Examination	Approved to sit for the exam
• S.B.W.	Pharmacist Reciprocity	Approved to sit for the exam
• A.P.S.	Pharmacist Cert of DTM	Approved application

Cognizant's Report – Bob Warnock

• GDNA Case # T32038	Revoke Technician Registration
• GDNA Case # B-31743	Close with no action
• GDNA Case # B-32025	Close with no action
• GDNA Case # B-32018	Misfill Policy #1
• GDNA Case # A-31979	Close with letter of concern
• GDNA Case # B-31784	Misfill Policy #1
• GDNA Case # A-32067	Refer to the Attorney General's office
• GDNA Case # A-31807	Refer to the Attorney General's office
• GDNA Case # T-32055	Close with letter of concern
• GDNA Case # A-31985	Close with letter of concern
• GDNA Case # A-32020	Refer to the Attorney General's office

Correspondences/Requests

• B.H.I.	Notice of discipline	No action taken
• M.C.	Notice of settlement agreement	No action taken
• M.V.S.P.	Notice of discipline	No action taken
• O.M.D.I.	Notice of discipline	No action taken
• A.B.R.	Request to terminate probation	Approved request
• C.A.J.	Request to terminate consent order	Approved request
• T.L.C.	Correspondence	Board directed staff to respond by stating the individual has thirty (30) days to submit requested report.
• J.W.	Appearance request	Denied request
• S.S.	Request for extension of application	Denied request
• W.S.S.	Request for extension of application	Denied request
• W.B.W.	Request for refund of late renewal fee	Denied request
• T.R.H.	Notice of discipline	No action taken
• B.I.	Correspondence	No action taken

• L.R.C.W.	Request regarding T.S.M.	Table pending receipt of additional information
• D.L.	Update regarding FDA inspection	No action taken
• H.S.A.H.	Update regarding settlement	No action taken
• R.C.	Appearance request	Denied request

Miscellaneous

- R.I.
- Staff asked for legal advice regarding the processing of applications.

Vicki Arnold seconded and the Board voted unanimously in favor of the motion.

There being no further business to discuss, the meeting was adjourned at 4:35p.m.

The next meeting of the Georgia Board of Pharmacy is scheduled for Wednesday, March 8, 2017 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 Tanja D. Battle, Executive Director