

GEORGIA BOARD OF PHARMACY
Board Meeting
Mercer University College of Pharmacy
3001 Mercer University Drive
Atlanta, GA 30341
March 18, 2015
9:00 a.m.

The following Board members were present:

Laird Miller, Chairperson
Mike Faulk, Vice-Chairperson
Vicki Arnold
Jim Bracewell
Chris Jones
Tony Moye
Bill Prather
Bob Warnock

Staff present:

Tanja Battle, Executive Director
Rick Allen, GDNA
Janet Wray, Senior Assistant Attorney General
Brandi Howell, Business Operations Specialist

Visitors:

Joe Bitterman, Pharmacy Creations
Mark Baum, Park Pharmacy
Benjamin Holley
Karen Skinner
Connie VanOrman, Habersham Medical
Jim Ehardt
Chris McKee
David Brass
Stuart Levine
Robert Brennan, Wellstar Health System
Andrea Parson
Scott Lindsay, CAPS
David Pfeiffenberger, Plus Delta Technology
Trish Yeatts
Jimmy England, Walgreens
Scott Biddulph, Target
Vonda Harrison, Eldercare Pharmacy
Sonya Nelson, Walmart
Curt Massey, Senior Health Consulting
Kallarin Mackey, GA Hospital Association
Melvin Smith, CVS
John Sisto, ESI

Chairperson Miller established that a quorum was present and called the meeting to order at 9:03 a.m.

Bill Prather 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, Chris Jones, Laird Miller, Tony Moye, Bill Prather and Bob Warnock.

Executive Session

Appearances

- B.F.H.
- H.M.C.
- C.S.M.
- V.F.P.I.
- W.P.H.

No votes were taken in Executive Session. Chairperson Miller declared the meeting back in Open Session.

Open Session

Chairperson Miller welcomed the visitors.

Appearances

Appearance by David Pfeiffenberger, PlusDelta Technologies, LLC: Mr. Pfeiffenberger provided a handout to the Board and thanked the members for allowing him to meet with them. Mr. Pfeiffenberger explained what PlusDelta Technologies does and stated that he was seeking clarification on whether its product, IVTrac, complies with the board rules for institutional pharmacy compounded medications. Following Mr. Pfeiffenberger's presentation, the Board recommended tabling further discussion on the matter for Executive Session.

Appearance by Curt Massey, Senior Health Consulting Alliance: Mr. Massey thanked the members of the Board for their service and for allowing him to meet with them. Mr. Massey stated that he is a consultant pharmacist in Georgia and is concerned about reverse distribution. He stated that OSHA is threatening to fine for any sharp containers that may contain something other than sharps. He explained that a lot of times sharp containers are used to destroy certain items and he was worried about whether that is a legal method of destruction. After further discussion, Mr. Allen explained that there is a new rule in progress where the Board is going to follow the DEA rule verbatim. Ms. Wray stated that the rule that needs to be amended is Rule 480-24-.06, which gives the method of destruction. Mr. Allen asked Mr. Massey to forward any suggestions he may have to the Board. Chairperson Miller thanked Mr. Massey for addressing this matter with the Board and stated that the Board will continue to work on finding a means for this to be done.

Approval of Minutes

Bill Prather made a motion to approve the Public Session minutes for the February 18, 2015 meeting. Jim Bracewell seconded and the Board voted unanimously in favor of the motion. The Board recommended tabling consideration of the Executive Session minutes for later in the day.

Ratifications

Chris Jones made a motion to ratify the list of issued licenses. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Petition for Waiver/Variance from Egalet U.S., Inc.

The Board directed staff to request additional information from Egalet U.S., Inc., and table consideration of this petition until the April 15, 2015 meeting.

Petition for Rule Waiver – Shared Solutions Pharmacy

Bill Prather made a motion to direct staff to respond by stating that a waiver is not needed in order to ship the glass syringe (“Autoject”); however, they should be advised that they may not ship drugs until they have been issued a permit. Chris Jones seconded and the Board voted unanimously in favor of the motion.

Petition for Rule Waiver – Shivani Mittal

Tony made a motion to deny the rule waiver petition. Bob Warnock seconded and the Board voted unanimously in favor of the motion.

Correspondence from William Prather

The Board considered this correspondence requesting permission for the antique Rexall Pharmacy sign to remain on the building currently housing Blue Ridge Pharmacy. This is so that it may remain in place should the building cease to be used as a pharmacy. The building is located at 793 East Main Street, Blue Ridge, Georgia 30513. Bob Warnock made a motion to grant Mr. Prather’s request, per the authority allowed in O.C.G.A. § 26-4-110. Chris Jones seconded and the Board voted in favor of the motion, with the exception of Bill Prather who abstained.

Correspondence from Ambrosia Treatment Center

The Board considered this correspondence requesting consideration as a treatment provider for the Georgia Board of Pharmacy. The Board recommended tabling the matter pending receipt of additional information.

Correspondence from Lynn E. Goddard, RPH015381

The Board considered this correspondence from Ms. Goddard requesting removal of her public consent order from her record. Bob Warnock made a motion to direct staff to send a letter to Ms. Goddard stating that she has successfully completed her probation and her status has returned to good standing. The motion died due to lack of a second.

Correspondence from David Bolton, University of TN Health Science Center

The Board considered this correspondence requesting a waiver of the roster fee. Chris Jones made a motion to deny the request. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Correspondence from William A. Morton

The Board considered this correspondence requesting information regarding the Prescription Drug Monitoring Program (“PDMP”). The Board directed staff to respond to Mr. Morton by stating that the law prohibits the Board from releasing this information to a non-government agency.

Correspondence from Jeff Lurey

The Board considered this correspondence requesting the Board adopt a policy that would be similar to that of the Florida Board of Pharmacy where a pharmacist can receive 5 hours per year (maximum 10 hours per biennium) for attending a Board of Pharmacy meeting in FL and where a member of the FL Board of Pharmacy can receive 5 hours per year (maximum 10 hours per biennium) for being a member of the Board. The Board directed staff to respond to Mr. Lurey by stating that the Board wishes to thank him for his suggestion; however, after consideration, the Board did not vote to adopt this change at this juncture.

Correspondence from Hal Ambuter, Reckitt Benckiser

The Board considered this correspondence requesting a formal letter of exemption. The Board directed staff to respond to Mr. Ambuter by stating that the Board does not require companies that *only* ship non-prescription OTC drugs to be licensed as wholesale distributors.

Georgia Drugs and Narcotics Agency – Rick Allen

Mr. Allen discussed policies for loss and theft of records, drugs, or controlled substances. Ms. Wray suggested the Board consider adopting a rule instead. After further discussion, Mr. Allen will work with Mr. Prather and Mr. Jones on a proposed rule regarding this matter and will bring back to the Board in April for consideration.

Mr. Allen discussed a draft GDNA Notification of Occurrence Form with the Board.

Attorney General’s Report – Janet Wray

No report.

Executive Director’s Report – Tanja Battle

Ms. Battle reported that she is working with software vendors about getting renewals ready for facilities and pharmacy technicians. They are currently in the testing phase at the moment.

Ms. Battle reported that the Board office has received 633 non-resident pharmacy applications to date. 298 permits have been issued and the remainder are in various stages of the application process.

Mr. Miller commented on sending renewal reminders to licensees. Ms. Battle responded that the Board sends out reminder notices to its licensees approximately 90 days in advance to those that have a valid email address in our database. A paper notice is mailed to licensees that do not have an email address. Mr. Miller asked if there can be a system where facilities notify their technicians. Ms. Battle responded by stating that she anticipates sending one notice to both facilities and technicians.

Miscellaneous

Questions regarding security paper: Discussion was held by the Board regarding changing the rule to mirror what the law says as it is causing a lot of confusion. The Board directed staff to work on proposed amendments to the rule and bring them back to the Board.

Rule 480-2-.05 Reciprocity. Amended: Bill Prather made a motion to post Rule 480-2-.05 Reciprocity. Amended. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

480-2-.05 Reciprocity. Amended

(a) In order for a pharmacist currently licensed in another jurisdiction to obtain a license as a pharmacist from the Board, an applicant shall:

(1) Complete an applicant form supplied by the National Association of Boards of Pharmacy (NABP); ~~but obtained from the Board’s office,~~ to apply for licensure with the Georgia State Board of Pharmacy. This application should be filed with NABP, and then with the Board for further review by the Board and an investigation by the Georgia Drugs and Narcotics Agency (GDNA), if necessary. If so requested, an applicant must produce evidence satisfactory to the Board or the GDNA which shows the applicant has the age, moral character, background, education, and experience demanded of applicants for registration by examination under O.C.G.A. 26-4 and by this chapter.

(2) Have attained the age of majority;

(3) Be of good moral character;

(4) Have possessed at the time of initial licensure as a pharmacist, all qualifications necessary to have been eligible for licensure at that time in this state;

- (5) Have presented to the Board proof of initial licensure by examination and proof that such license is in good standing;
 - (6) Have presented to the board proof that any other license granted to the applicant by any other state is not currently suspended, revoked, or otherwise restricted for any reason except nonrenewal or for the failure to obtain the required continuing education credits in any state where the applicant is currently licensed, but not engaged in the practice of pharmacy;
 - (7) Have successfully passed a jurisprudence examination approved by the Board on Georgia's pharmacy laws and Board regulations, and a practical examination approved by the Board;
 - (8) If requested by the Board, have personally appeared for an interview with a member of the Board;
 - (9) Have paid the fees specified by the Board.
- (b) No applicant may be granted a license by reciprocity if that person has failed the examination for licensure as a pharmacist in this state.
 - (c) No applicant shall be eligible for reciprocity unless the state in which the applicant is licensed as a pharmacist also grants license reciprocity to pharmacist duly licensed by examination in this state under like circumstances.

A motion was made by Jim Bracewell, seconded by Chris Jones, and the Board voted that the formulation and adoption of this amendment does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

In the same motion, the Board 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§ 50-13-9 16 5 9 4(a)(3)(A), (B), (C) and (D). The formulation and adoption of this rule will impact every licensee in the same manner and each licensee is independently licensed, owned and operated and dominant in the field of pharmacy.

NABP Meeting: Mr. Miller reported that the NABP meeting is May 16th-19th. Bob Warnock made a motion for Mr. Faulk to be the voting delegate with Mr. Jones being the alternate. Additionally, the board members will be reimbursed for expenses incurred at the meeting. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

Mail order rule amendments: Bob Warnock made a motion to post Rules 480-48-.01 Definitions, 480-48-.02 Conditions for Use of Delivery by Mail, and 480-48-.03. Delivery by Pharmacy. Jim Bracewell seconded and the Board voted unanimously in favor of the motion.

480-48-.01 Definitions

For purposes of this chapter of the Rules and Regulations, the following definitions apply:

- (a) "Board" shall mean the Georgia Board of Pharmacy.
- (b) "Delivery by Mail" or "delivered by mail" or "deliver by mail" shall mean delivery to a patient or the patient's designee by the United States Postal Service or by a commercial common carrier from the pharmacy which fills the prescription. ~~It is not considered to be delivery by mail when a pharmacy uses its own employees or employs a local courier service to deliver filled prescriptions in the same day from the pharmacy to a patient or facility providing care to the patient.~~
- (c) "Delivery by Pharmacy" shall mean delivery directly to a patient or patient's designee from the pharmacy by contract or private carrier or an employee of the pharmacy.
- (d) "Mail order pharmacy" shall mean a pharmacy that uses delivery by mail as a means of delivery of a prescription drug to a patient or the patient's designee.
- (e) "Pharmacy" means a pharmacy holding a current Board issued license to operate a pharmacy in Georgia, including pharmacy benefit managers required to be licensed pursuant under O.C.G.A. §26-4-110.1, and nonresident pharmacy permit holders.

480-48-.02 Conditions for Use of Delivery by Mail

(1) Any pharmacy can regularly employ the U.S. Postal Service or a common commercial carrier to deliver a drug which requires a prescription to a patient only after the patient has requested that a pharmacy ~~use this method of delivery~~ deliver by mail for his/her filled prescription drugs. Any pharmacy providing ~~mail order service~~ delivery by mail to its patients is required to follow applicable Georgia laws and rules.

(2) A mail order pharmacy located outside this state is required to follow all applicable pharmacy and drug rules and laws of the state in which the pharmacy is physically located.

(3) A mail order pharmacy shall ensure that all prescription drug order medications are delivered to the patient in accordance with standards of the drug manufacturer's temperature standards as set by the Food and Drug Administration (FDA). Pharmacy shall insure integrity of any drug requiring temperature control other than "room temperature storage" that is delivered by mail order by enclosing in each medication's packaging a USP-recognized method by which the patient can easily detect improper storage or temperature variations.

(4) Any pharmacy using delivery by mail to deliver dispensed prescription drugs shall comply with the following conditions:

(a) Any pharmacy that ~~employs a mailing or shipping party~~ uses delivery by mail is accountable to the Board to arrange for the appropriate mailing/shipping process.

(b) A mail order pharmacy shall provide a method by which a patient or patient's caregiver can notify the mail order pharmacy as to any irregularity in the delivery of their medication to include but not be limited to:

1. Timeliness of delivery
2. Condition of the prescription drug upon delivery; and
3. Failure to receive the proper prescription drug.

(c) Medications designated as requiring special handling by this rule must be signed for upon delivery by the patient or patient's designee. In the event that the medication cannot be delivered, the package will not be left behind and shall be returned to the mailing or shipping service to be held for pickup until signed for by the patient or the patient's designee, or redelivered to the patient if so requested by the patient or the patient's caregiver. The Board has designated the following drugs as requiring special handling:

1. All Schedule II, III, IV, and V controlled substances.

(d) A mail order pharmacy shall provide a process by which, if the delivery of a prescription medication is in any way compromised, the pharmacy will replace the patient's medication, to be delivered by next-day delivery or the mail order pharmacy will immediately contact the patient's prescriber to arrange for a prescription for a minimum seven (7) day supply of the medication to be dispensed to the patient by a licensed pharmacy of the patient's choice.

(e) A pharmacy that employs delivery by mail must provide written information, set forth in Board Rule 480-31-.01, for each drug that is delivered, and a method of electronic or telephonic communications for a pharmacist or a Georgia-licensed pharmacy intern under direct supervision of the pharmacist to provide consultation or counseling in accordance with the obligations of O.C.G.A. §26-4-85. All such counseling will be documented in the pharmacy's patient records. It is sufficient proof to show counseling was refused if a patient or patient's caregiver does not contact the pharmacy.

(f) The pharmacy shall provide information to the patient on the procedure that the patient should follow if any prescription drug does not arrive in a timely manner, or if the integrity of the packaging or medication has been compromised during shipment and delivery by mail.

(g) A pharmacy using delivery by mail shall document in its records when the prescription drug was sent to the patient.

(h) A pharmacy using delivery by mail shall document the instances when prescription drugs have been compromised during shipment and delivery by mail or when drugs do not arrive in a timely manner, and shall maintain such documentation for two (2) years. In addition, the mail order pharmacy shall maintain

reports of patient complaints and internal/external audits about timeliness of deliveries, condition of the medication when received by patient including medication that was compromised in delivery, misfills of prescriptions, and the failure of a patient to receive medication. Such records shall be provided to the Board, upon request.

(i) A pharmacy or a pharmacist shall refuse to deliver by mail a prescription drug which, in the professional opinion of the pharmacy or pharmacist may be clinically compromised by delivery by mail.

(j) A mail order pharmacy shall make available to the patient or the patient's caregiver contact information of the Board of Pharmacy.

480-48-.03. Delivery by Pharmacy.

Any pharmacy may provide for delivery by pharmacy upon the request of the patient or the patient's designee. The Board will hold the pharmacy responsible for any problems in the service of delivery by pharmacy. In order for a delivery to be considered delivery by pharmacy, the delivery must be on a continuous route from the pharmacy to the patient or the patient's designee. All medications shall be maintained within the temperature ranges recommended by the manufacturer until the delivery has been completed. All deliveries of controlled substances must be signed for upon delivery by the patient or patient's designee.

A motion was made by Jim Bracewell, seconded by Bob Warnock, and the Board voted that the formulation and adoption of these amendments do not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rules cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

In the same motion, the Board 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§ 50-13-9 16 5 9 4(a)(3)(A), (B), (C) and (D). The formulation and adoption of these rules will impact every licensee in the same manner and each licensee is independently licensed, owned and operated and dominant in the field of pharmacy.

Rule 480-22-.04 Requirements of a Schedule II (C-II) Controlled Substance Prescription Drug: Chris Jones made a motion to post Requirements of a Schedule II (C-II) Controlled Substance Prescription Drug. Jim Bracewell seconded and the Board voted in favor of the motion, with the exception of Bob Warnock, who abstained.

480-22-.04 Requirements of a Schedule II (C-II) Controlled Substance Prescription Drug Order

(1) A pharmacist or pharmacy intern/extern shall dispense a schedule II Controlled Substance (C-II), as defined by O.C.G.A. § 16-13-26, only pursuant to a written prescription drug order, except as provided in paragraph (3) of this Rule.

(a) A C-II prescription drug order, meeting the requirements of Rule 480-22-.03(1)(a), may be transmitted by the practitioner or the practitioner's agent, to a pharmacy via facsimile machine or equipment. Prior to the practitioner's agent transmitting such schedule II (C-II) prescription via facsimile machine, the C-II prescription drug order, meeting the requirements of Rule 480-22-.03(1)(a), may be transmitted by the practitioner or the practitioner's agent, but not the patient or patient's agent, to a pharmacy via facsimile machine or equipment. The original written, signed prescription drug order must be presented to the pharmacist prior to the actual dispensing of the schedule II (C-II) drug, except as provided in paragraphs (4), (5) or (6) of this section.

(2) Upon dispensing a schedule II (C-II) drug, the pharmacist shall physically sign his or her name on either the face or rear of the schedule II (C-II) prescription drug order in such a manner that the signature does not cover any information required by this chapter. In addition, the pharmacist will ensure that the dispensing date and the serial number for the prescription drug order are indicated on either the face or the back of the C-II prescription drug order.

(3) In the case of an emergency situation, a pharmacist may dispense a schedule II (C-II) controlled substance only upon receiving oral authorization of the prescribing practitioner. For purposes of this paragraph, an emergency situation means a situation in which the prescribing practitioner determines that immediate administration of a schedule II (C-II) controlled drug is necessary, there is no appropriate alternative treatment or drug in a schedule less than CII, and it is not reasonably possible for the practitioner to provide a written prescription drug order for the pharmacist dispensing the drug prior to issuance. Such emergency prescription drug order is permissible provided that:

(a) The quantity prescribed and dispensed is limited to the amount adequate to treat the patient during the emergency period. Dispensing beyond the emergency period must be pursuant to an additional written prescription drug order signed by the prescribing practitioner;

(b) The prescription drug order shall be immediately reduced to writing by the pharmacist or pharmacy intern/extern working under the direct supervision of a licensed pharmacist and shall contain all information required in Rule 480-22-.03, except for the signature of the prescribing practitioner;

(c) If the prescribing practitioner is not known to the pharmacist, the pharmacist must make reasonable effort to determine that the oral authorization came from a licensed practitioner, such effort may include a callback to the prescribing individual using his or her telephone number and/or other good faith efforts to insure the practitioner's identity; and

(d) Within 7 days after authorizing an emergency oral prescription drug order, the prescribing practitioner shall cause a written prescription drug order to be delivered to the dispensing pharmacist for the emergency quantity prescribed. In addition to conforming to the requirements of Rule 480-22-.03, the prescription shall have written on its face "Authorization for Emergency Dispensing," and the date of the oral order.

1. The written prescription drug order shall be delivered to the pharmacist in person or by other means, but if delivered by mail or common carrier it must be postmarked within the 7 day period. Upon receipt, the dispensing pharmacist shall attach this prescription drug order to the emergency oral prescription drug order, which had earlier been reduced to writing. The pharmacist shall notify the Georgia Drugs and Narcotics Agency, if the prescribing practitioner fails to deliver a written prescription drug order to the dispensing pharmacist.

(4) A prescription drug order for a terminally ill patient, prepared in accordance with Rule 480- 22-.03 written for a Schedule II Controlled Substance as defined by O.C.G.A. §16-13-26, may be transmitted directly by the practitioner or the practitioner's agent to the dispensing pharmacy by facsimile machine.

(a) Prior to the prescribing practitioner's agent transmitting such Schedule II Controlled Substance prescription via facsimile machine, the name of the agent and a telephone number for the prescribing practitioner must be included in the face of prescription. The information may be used for verification of the prescription.

(b) The facsimile serves as the original, written prescription drug order for purposes of this paragraph, and it shall be maintained in accordance with Rule 480-22-.04(7) and this chapter. After transmission of the original prescription, the pharmacist should suggest that the practitioner mark "VOID" across the face of the prescription, and that it be maintained by the practitioner in the patient's medical record chart.

(5) A prescription drug order prepared in accordance with Rule 480-22-.04 written for any C-II substance for a resident of Long Term Care Facility (LTCF) may be transmitted directly by the prescribing practitioner or the practitioner's agent, but not the patient or the patient's agent, to the dispensing pharmacy by facsimile machine or equipment.

(a) The practitioner, ~~or~~ practitioner's agent, or pharmacist will note on the prescription drug order that the patient is a LTCF patient by writing "LTCF" on the face of the prescription.

(b) In addition to the term LTCF being noted on the face of the prescription, whenever a practitioner's agent transmits or a pharmacist receives such a prescription, the name of the agent and the practitioner's telephone number or the name and license number of the pharmacist must be included on the face of the prescription. This information may be used for verification of the prescription drug order.

(c) The facsimile serves as the original, written prescription drug order for purposes of this paragraph (c), and it shall be maintained in accordance with Rule 480-22-.04(a) and this chapter. After transmission of the original prescription, the pharmacist should suggest that the practitioner mark "VOID" across the face of the prescription, and that it be maintained by the practitioner in the patient's medical record chart.

(6) A prescription drug order prepared in accordance with Rule 480-22-.03 written for any Schedule II Controlled Substance as defined by O.C.G.A. § 16-13-26, for a patient of a hospice program licensed by the State of Georgia Department of ~~Human Resources~~ Community Health may be directly transmitted by the practitioner or the practitioner's agent, but not the patient or the patient's agent, to the dispensing pharmacy by facsimile machine or equipment.

(a) The practitioner or practitioner's agent will note on the prescription drug order that the patient is a hospice patient by writing "HOSPICE" on the face of the prescription.

(b) In addition to the term "HOSPICE" being noted on the face of the prescription, whenever a practitioner's agent transmits such prescription, the name of the agent and the practitioner's telephone number must be included on the face of the prescription. This information may be used for verification of the prescription drug order.

(c) The facsimile serves as the original, written prescription drug order for purposes of this paragraph, and it shall be maintained in accordance with Rule 480-22-.04(a) and this chapter. After transmission of the original prescription drug order, the pharmacist should suggest that the practitioner mark "VOID" across the face of the prescription, and that it be maintained by the practitioner in the patient's medical chart.

(7) Record keeping for Schedule II Controlled Substances shall be as follows:

(a) Original and all other hard copy schedule II (C-II) prescription drug orders shall be maintained in a separate file from all other prescription drug orders.

(b) Whenever a pharmacy utilizes a computerized record keeping system in addition to hard copies to record the dispensing of prescription drug orders for C-II drugs, such records shall be immediately retrievable without delay in a printout form by the prescribing practitioner's name, patient's name, drug name or date of dispensing upon a verbal request from a representative of the Georgia Drugs and Narcotics Agency (GDNA), and/or one of its agents.

(8) Whenever a pharmacist receives a prescription for a C-II controlled substance, and either the quantity of the drug to be dispensed or the strength of the drug to be dispensed has not been included by the prescribing practitioner, or when the strength of the prescribed drug is not immediately available, in order to dispense this drug, the pharmacist must perform the following:

(a) Contact and speak directly with the practitioner, not with an agent for the practitioner, and inform the practitioner of the missing information on the face of the prescription, or the problem with the prescription in question by:

1. Determining the quantity of the drug the practitioner intended to be dispensed; or
2. Determining the strength of the drug the practitioner intended to be dispensed; or
3. Informing the practitioner the drug in the strength prescribed is not immediately available, but another strength of the prescribed drug is available.

(b) Regarding the information provided by the practitioner, the pharmacist must write the missing quantity, the missing strength, or the changed quantity and strength of the prescribed drug on the face of the prescription along with the initials of the pharmacist.

(c) On the back of the prescription, the pharmacist must write the date and time the pharmacist spoke with the practitioner, along with a brief explanation of the situation and how it was resolved.

(d) Nothing in this rule is intended to require a pharmacist in a hospice or LTCF setting to obtain a new prescription drug order when changes are made to a patient's dosing requirements. This action may be taken as long as the pharmacist verifies the change(s) with the practitioner and makes a notation of the change(s) along with the date of the change(s) on the original hardcopy prescription drug order.

(9) A Schedule II narcotic controlled substance prescription prepared in accordance with Rule 480-22-.03 and as defined by O.C.G.A. § 16-13-26, to be compounded for the direct administration to a patient

by parenteral, intravenous, intramuscular, subcutaneous or intraspinal infusion may be transmitted by the practitioner or the practitioner's agent to the pharmacy by facsimile. The facsimile serves as the original written prescription for purposes of this rule and it shall be maintained in accordance with this rule and state and federal law.

A motion was made by Jim Bracewell, seconded by Chris Jones, and the Board voted that the formulation and adoption of this amendment does not impose excessive regulatory cost on any licensee and any cost to comply with the proposed rule cannot be reduced by a less expensive alternative that fully accomplishes the objectives of the relevant code sections.

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Jim Bracewell made a motion and Chris Jones 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, Chris Jones, Laird Miller, Tony Moye, Bill Prather, and Bob Warnock.

Executive Session

Georgia Drugs and Narcotics Agency – Rick Allen

- Discussed PDMP program

Cognizant's Report – Mike Faulk

- GDNA Case #T-31425
- GDNA Case #A-15-05
- GDNA Case #A-15-04
- GDNA Case #B-31220
- GDNA Case #B-31296
- GDNA Case #B-31237
- GDNA Case #B-31361
- GDNA Case #B-31365
- GDNA Case #B-31356
- GDNA Case #B-31359
- GDNA Case #A-31316
- GDNA Case #B-31330
- GDNA Case #B-31367
- GDNA Case #B-31355
- GDNA Case #A-31431

Attorney General's Report – Janet Wray

Ms. Wray presented the following consent orders:

- B.H.
- T.D.

Ms. Wray discussed the following:

- February 18, 2015 Executive Session Minutes

Applications

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

Correspondences/Requests

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

Executive Director’s Report – Tanja Battle

- Z.R.

Miscellaneous

- P.D.T.L.
- L.E.G.

No votes were taken in Executive Session. Chairperson Miller declared the meeting back in Open Session.

Open Session

Bill Prather made a motion to approve the Executive Session minutes for the February 18, 2015 meeting as amended during Executive Session. Chris Jones seconded and the Board voted unanimously in favor of the motion.

Mike Faulk made a motion for the Board to take the following actions:

Appearances

- | | | |
|------------|------------------------------|---|
| • B.F.H. | Request to reinstate license | Approved request |
| • H.M.C. | Remote order entry policy | Approved policy |
| • C.S.M. | Denied Pharmacy Tech | Overturn denial and approve registration |
| • V.F.P.I. | Denied Non-Resident Pharmacy | Denial upheld |
| • W.P.H. | Retail Pharmacy | Table pending receipt of additional information |

Georgia Drugs and Narcotics Agency – Rick Allen

- Discussed PDMP program: No action taken.

Cognizant’s Report – Mike Faulk

- GDNA Case #T-31425 Accept Voluntary Surrender

- GDNA Case #A-15-05 Accept Voluntary Surrender
- GDNA Case #A-15-04 Accept Private Interim Consent Order
- GDNA Case #B-31220 Close case with letter of concern
- GDNA Case #B-31296 Close case
- GDNA Case #B-31237 Close case
- GDNA Case #B-31361 Close case
- GDNA Case #B-31365 Close case
- GDNA Case #B-31356 Close case
- GDNA Case #B-31359 Close case
- GDNA Case #A-31316 Refer to the Attorney General's office for discipline
- GDNA Case #B-31330 Refer to the Attorney General's office for discipline
- GDNA Case #B-31367 Close case with letter of concern
- GDNA Case #B-31355 Close case with letter of concern
- GDNA Case #A-31431 Refer to the Attorney General's office for discipline

Attorney General's Report – Janet Wray

Ms. Wray presented the following consent orders:

- Brandon Hayes Public consent order accepted
- T.D. Private consent order accepted

Ms. Wray discussed the following:

- February 18, 2015 Executive Session Minutes: Discussed suggested amendments.

Applications

- | | | |
|--------------------------------|--------------------------|---|
| • D.Y. | Pharmacy Technician | Denied registration |
| • L.H. | Pharmacy Technician | Denied registration |
| • M.H. | Pharmacy Technician | Denied registration |
| • B.S. | Pharmacy Technician | Denied registration |
| • P.W. | Pharmacy Technician | Denied registration |
| • S.M. | Pharmacist Intern | Denied application |
| • T.E.T. | Pharmacist Intern | Approve pending receipt of additional information |
| • A.C.O. | Pharmacist Applicant | Table pending receipt of additional information |
| • I.E.D. | Pharmacist Applicant | Allow to sit for examination |
| • T.T.D.P. | Pharmacist Applicant | Approved request to retake MPJE |
| • W.E.C. | Pharmacist Reinstatement | Approved with letter of concern |
| • B.N.T. | Pharmacist Renewal | Table pending receipt of additional information |
| • C.H. | Non-Resident Pharmacy | Denied application |
| • C.H. | Non-Resident Pharmacy | Denied application |
| • CVS Caremark | Non-Resident Pharmacy | Approved application |
| • CVS Caremark | Non-Resident Pharmacy | Approved application |
| • CVS Pharmacy | Non-Resident Pharmacy | Approved application |
| • Maxor Corr Pharm Services | Non-Resident Pharmacy | Approved application |
| • Target Mail Order Phar T1899 | Non-Resident Pharmacy | Approved application |
| • Triad Isotopes, Inc. | Non-Resident Pharmacy | Approved application |

• Triad Isotopes, Inc.	Non-Resident Pharmacy	Approved application
• Triad Isotopes, Inc.	Non-Resident Pharmacy	Approved application
• Triad Isotopes, Inc.	Non-Resident Pharmacy	Approved application
• Triad Isotopes, Inc.	Non-Resident Pharmacy	Approved application
• M.C.P.	Non-Resident Pharmacy	Table pending receipt of additional information
• W.V.P.	Non-Resident Pharmacy	Denied application
• A.C.P.	Non-Resident Pharmacy	Application withdrawn
• Cardinal Health 414	Non-Resident Pharmacy	Approved application
• Cardinal Health 414	Non-Resident Pharmacy	Approved application
• Meds for Vets, LLC	Non-Resident Pharmacy	Approved application
• R.I.V.P.	Non-Resident Pharmacy	Denied application
• C.C.P.I.	Non-Resident Pharmacy	Denied application
• B.L.	Non-Resident Pharmacy	Denied application
• K.C.P.	Non-Resident Pharmacy	Denied application
• Physician Spc Compounding	Non-Resident Pharmacy	Application approved
• H.I.S.	Non-Resident Pharmacy	Table pending receipt of additional information
• Preferred Rx LLC	Non-Resident Pharmacy	Approved application
• S.C.L.	Non-Resident Pharmacy	Denied application
• Healix Infusion Therapy Inc.	Non-Resident Pharmacy	Approved application
• PARI Respiratory Equip	Wholesale Pharmacy	Approved application
• Owens & Minor Distribution	Wholesale Pharmacy	Approved application
• Habeeb Asiru-Balogun	Pharmacist Cert of DTM	Approved application
• Jamiee D. Johnson	Pharmacist Cert of DTM	Approved application

Correspondences/Requests

• A.E.	Request to extend renewal period	Denied request
• C.L.T.	Request to extend application	Denied request
• M.R.M.C.I.	Remote Order Entry	Approved
• T.N.	Request to extend intern license	Denied request
• X.P.	Notice of discipline	No action taken
• C.E.C.	Request to lift supervised practice restriction	Approved request
• R.B.H.S.	Remote Order Entry	Approved
• T.H.A.	Remote Order Entry	Schedule to meet with the Board
• A.L.H.	Request to lift PIC restriction	Approved request
• W.M.H.P.	Remote Order Entry	Denied
• K.L.A.	Supervising pharmacist request	Approve A.L.B. only
• S.P.	Request for appearance	Denied pharmacy technician application and schedule to meet with the Board
• O.R.M.C.	Remote Order Entry	Approved
• F.B.	Request for inactive status	Directed staff to have licensee submit an Application for Inactive Status
• T.A.	Request for consideration of treatment providers	Table pending receipt of additional information

- J.A.D. Request to remove practice under direct supervision restriction Table pending receipt of additional information

Executive Director's Report – Tanja Battle

- Z.R. Request for waiver of renewal fees Extend expiration date to 06/30/2017

Miscellaneous

- P.D.T.L. Request regarding IVTrac Approved request
- L.E.G. Request to have consent order removed from public record Denied request

Bob Warnock seconded and the Board voted in favor of the motion, with the exception of Jim Bracewell, who abstained from the vote regarding GDNA Case #A-31431.

The next scheduled meeting of the Georgia Board of Pharmacy is scheduled for Wednesday, April 15, 2015 at 9:00 a.m. at the Department of Community Health's office located at 2 Peachtree Street, N.W. 36th Floor, Atlanta, GA 30303.

The Board meeting adjourned at 6:28 p.m.

Minutes recorded by Brandi P. Howell, Business Operations Specialist
 Minutes edited by Tanja D. Battle, Executive Director