

**Maryland Board of Pharmacy
Public Board Meeting**

Meeting Minutes

Date: April 15, 2015

Name	Title	Present	Absent	Present	Absent
Board Committee					
Ashby, D.	Commissioner	X		2	2
Bradley-Baker, L.	Commissioner/Secretary	X		3	1
Gavgani, M. Z.	Commissioner/Treasurer	X		3	1
Israbian-Jamgochian, L.	Commissioner/President	X		4	
Jones, David H.	Commissioner	X		4	
Peters, Roderick	Commissioner	X		4	
Robinson, T.	Commissioner	X		4	
Rochester, C.	Commissioner	X		3	1
Roy, S.	Commissioner	X		4	
Smith, J.	Commissioner	X		4	
St. Cyr, II, Z. W.	Commissioner	X		4	
Zagnit, B.	Commissioner	X		4	
Board Counsel					
Bethman, L.	Board Counsel	X		3	1
Felter, B.	Staff Attorney	X		4	
Board Staff					
Naesea, L.	Executive Director	X		4	
Wu, Y.	Compliance Manager	X		4	
Waddell, L.	Licensing Manager	X		3	1
Gaither, P.	Administration and Public Support Manager		X	2	2
Jeffers, A.	Legislation/Regulations Manager	X		3	1
Johnson, J.	MIS Manager	X		4	

April 15, 2015

Subject	Responsible Party	Discussion	Action Due Date (Assigned To)	Results
I. Executive Committee Report(s)	A.) L. Israbian-Jamgochian, Board President	<p><i>Members of the Board with a conflict of interest relating to any item on the agenda are advised to notify the Board at this time or when the issue is addressed in the agenda.</i></p> <ol style="list-style-type: none"> L. Israbian-Jamgochian called the meeting to order at 9:36 a.m. L. Israbian-Jamgochian reminded all guests to sign the guest log, indicating whether they would like continuing education credits. L. Israbian-Jamgochian requested that all guests introduce themselves and also informed them that the meeting agenda and packet materials were available for review. She advised guests that all packets must be returned at the end of the meeting. 		
	B.) L. Bradley-Baker, Secretary	<ol style="list-style-type: none"> Review and approval of March 2015 meeting minutes. 	4. Motion to approve minutes by D. Ashby, 2 nd by T. Robinson.	4. The Board voted to approve this motion.
II. A. Executive Director Report	L. Naesea, Executive Director	<ol style="list-style-type: none"> Operations Updates The building renovations are almost fully complete. Three large meeting rooms are available, that will be equipped with new A/V tools, furniture, teleconference, and videoconference equipment. The cost for the upgrades will be shared by all of the Boards in the building. 		

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		<p>The Wholesale Distributor renewal period has begun and the graduating pharmacists applying for licensure will result in an increase of workload for Board of Pharmacy staff members.</p> <p>2. Meetings Updates</p> <p>FDA Drug Compounding Meeting</p> <p><i>L Bethman-</i> A regulatory meeting held by the FDA was attended by L. Bethman and M. Gavgani. This was a follow-up meeting from last year's meeting regarding the initial passing of the DQSA. This meeting was primarily focused on Part1, which is sterile compounding, the licensing standards of outsourcing facilities, and the distinction between compounding from an outsourcing facility perspective and traditional compounding in pharmacies. Most of the states have begun implementing changes in their law as a result of the DQSA. They are trying to get semblance about how states can get to a more uniform response. There is a MOU pending between the states and the FDA with respect to pharmacies who compound patient specific products for inter-state dispensing.</p> <p><i>M. Gavgani-</i> As the FDA releases drafts and guidance documents, review and feedback is encouraged. Mitra was impressed by the way the FDA considered and incorporated the</p>		

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		<p>feedback from last year's meeting into this year's meeting.</p> <p>University of Maryland, Department of Psychiatry 2nd Annual Telemental Health Meeting, entitled, "<i>Future Directions for Videoconferencing Technology</i>," is scheduled for Wednesday, June 3, from 11:00 am to 1:30 pm at Westminster Hall. Registration for this event is required.</p> <p>The NABP Annual Meeting will be held in New Orleans, LA from May15-19, 2015. L. Naesea, L. Israbian-Jamgochian, and J. Smith will be attending on behalf of the Board.</p> <p>L. Naesea acknowledged the contributions of Jenna Rocchio, who is a pharmacy student from the University of Maryland doing her final rotation at the Board.</p> <p><i>D. Ashby-</i> A meeting with the Community Colleges of Maryland was attended by D. Ashby on March 25. There were 16 total colleges in attendance, of which 7 have pharmacy technician training programs with 2 of those having ASHP pharmacy technician training program accreditation. ASHP and ACPE announced a joint accreditation of pharmacy technician training programs in 2014 and also established a pharmacy technician accreditation commission (PTAC) to assume the task of assuring and advancing the quality of pharmacy technician education and training</p>		

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		<p>programs. One of the caveats of this is a position change by the Pharmacy Technician Certification Board (PTCB), who has stated that by 2020, in order to sit for the PTCB exam you must have graduated from an accredited PTAC program. PTCB is also considering specialty certifications. The community colleges are planning what they need to do individually and collectively to change what they do with technician training to better support technicians in this state when the 2020 regulation goes into effect. D. Ashby surveyed the Directors of Pharmacy for hospitals and health systems with the question “Do you require PTCB certification?” Of the 30 responses received, 80% required PTCB and 13.2% listed it as highly desired. In the future, if the community colleges wanted to use hospitals and health systems as a training site for experiential learning, they would have to be ASHP accredited. Also, if they wanted to place graduates in hospitals and health systems, PTAC accreditation would be necessary.</p>		
B. Administration and Public Support (APS)	B. P. Gaither, APS Manager	<p>1. Personnel Updates</p> <p><i>L. Naesea-</i> The licensing specialist that was recently hired resigned due to family illness. The board is doing its best to have the position filled as quickly as possible. There will be 2 temporary employees while recruitment for this vacancy is done.</p>		

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		<ul style="list-style-type: none"> a. <i>Total Number of Positions:</i> 30 b. <i>Current Permanent Staff:</i> 26 c. <i>Vacancies as of this month:</i> Coordinator Special Programs, Compliance unit Health Occupations Investigator I, Compliance unit (2) Administrative Specialist I, Executive Unit (to be re-classified to Unit Deputies - 08926 and 089218) d. <i>Current Contractual or Temporary Emergency Employees (TE) Staff:</i> 1 Contractual conversion in progress as of April 8, 2015. e. <i>Request for Freeze Hire in progress:</i> 0 f. <i>Recruitment in progress:</i> 1 Health Occupations I for Compliance. g. <i>Interview in progress:</i> 1 Coordinator Special Programs for Compliance h. <i>Selection in progress:</i> 0 i. <i>Appointment in progress/completed:</i> 1 Office Secretary I Start Date: April 15, 2015 j. <i>Reclassification in progress:</i> 1 Administrative Specialist I to Program Manager I -089216. Awaiting Department of Budget and Management approval. k. <i>Current contracts for Peer Review/Expert Witness:</i> 2 l. <i>Agency Reorganization:</i> Awaiting Department of Budget and Management approval. <p>2. Contracts and Procurement</p>		

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		<i>Presented by J. Johnson during the MIS unit section.</i>		
C. MIS	J. Johnson, MIS Manager	<p>1. Unit Updates</p> <p>DHMH has approved the applicant selected for the software engineer position.</p> <p>Resumes have been reviewed and interviewees have been selected for the business analyst consultant.</p> <p>DHMH recently issued an agency wide moratorium on all IT purchases, though any Board of Pharmacy issues would likely be exempt.</p> <p>In response to inquiries from the Licensing Committee:</p> <ol style="list-style-type: none"> 1. A unique identifier cannot be placed on a potential licensee's/registrant's application or in the MIS system (inquiry was made due to some candidates who may not have a social security number) and 2. Licensees/Registrants cannot print their own license in the current MIS system. <p>Both of these issues will be included in the RFP for a new vendor for the board's MIS system.</p> <p>The board will also contact NABP to ask what type of identifier is used for foreign pharmacists or any applicant who does not have a social security number and wishes to take a NABP administrated examination.</p>		

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D. Licensing	Y. Wu, Compliance Manager	1. Unit Updates																																					
		None at this time.																																					
		2. Monthly Statistics																																					
		March 2015																																					
		<table><tr><td>License Type</td><td>New</td><td>Renewed</td><td>Total</td><td></td></tr><tr><td>Pharmacist</td><td>41</td><td>372</td><td>10531</td><td></td></tr><tr><td>Vaccination</td><td>25</td><td>2</td><td>3727</td><td></td></tr><tr><td>Pharmacy</td><td>21</td><td>0</td><td>1908</td><td></td></tr><tr><td>Distributor</td><td>5</td><td>4</td><td>1116</td><td></td></tr><tr><td>Pharmacy Technician</td><td>160</td><td>232</td><td>9146</td><td></td></tr><tr><td>Student Technician</td><td>44</td><td>0</td><td>863</td><td></td></tr></table>	License Type	New	Renewed	Total		Pharmacist	41	372	10531		Vaccination	25	2	3727		Pharmacy	21	0	1908		Distributor	5	4	1116		Pharmacy Technician	160	232	9146		Student Technician	44	0	863			
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L. Naesea would like to remind the Board and audience members that we are still going through a staff re-organization and publicly acknowledge the diligence and hard work of Y. Wu and L. Waddell throughout this process.																																							
D. Ashby-																																							
A great project for incoming students doing a rotation at the Board of Pharmacy would be to review, compare, and analyze the statistical information for presentation to recognize trends of the workforce data produced by the board and state stat.																																							

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E. Compliance	Y. Wu, Compliance Manager	<p>1. Unit Updates <i>None at this time.</i></p> <p>2. Monthly Statistics <i>Complaints & Investigations:</i></p> <p>New Complaints- 23 Resolved (Including Carryover)- 34 Final disciplinary actions taken- 8 Reversals- 0 Summary Actions Taken- 0</p> <p><i>Inspections:</i></p> <p>Total- 148 Annual Inspections- 134 Opening Inspections- 7 Closing Inspections- 0 Relocation Inspections- 2 Board Special Investigation Inspections- 5 Division of Drug Control Closing Inspections- 4</p> <p><i>PEAC Statistics</i></p> <p>Total Pharmacist Rehabilitation Clients- 18 Pharmacists- 16 Technicians – 0 Pharmacy Students– 0 Board Referred. PEAC Monitored Clients- 0 Drug Test Results- 20 Number of Positive Results- 0 Discharged Clients/Closed Cases- 0</p>		
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F. Legislation & Regulations	A. Jeffers, Legislation & Regulations Manager	<p><u>REGULATIONS:</u></p> <p><u>10.34.38 Pharmacy Interns</u></p> <p>The proposal was published in the Maryland Register on January 23, 2015 with a 30 day comment period. No comments received.</p> <p>Notice of Final Action published April 3, 2015 with an effective date of July 1, 2015</p> <p><u>10.13.01 Dispensing of Prescription Drugs by a Licensee</u></p> <p>Proposal published May 30, 2014. Placed on HOLD by AELR (Del. Morhaim).</p> <p>Working with the University of Maryland School of Pharmacy to ensure there are enough CE credits available for the phase in.</p> <p>At the present time there are only 3.25 credits and there needs to be 4 credits.</p> <p>To be revised this year:</p> <p><u>10.34.19 Sterile Pharmaceutical Compounding</u></p> <p><u>10.34.33 Prescription Drug Repository Program Referred to Practice Committee</u></p> <p><u>Medical Marijuana Legislation and proposed regulations – referred to Practice.</u></p> <p><u>LEGISLATION:</u></p>		

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		<p><u>Tracking List - Board of Pharmacy - 2015 Legislation</u> <u>(update handout will be provided at the meeting)</u></p> <p>L. Israbian-Jamgochian acknowledged the hard work and dedication of A. Jeffers during this legislative session.</p> <p>Medical cannabis question has beentabled for the Practice Committee.</p> <p><u>OTHER MATTERS:</u> <i>None at this time.</i></p>		
III. Committee Reports A. Practice Committee	H. M. Gavgani, Chair	<p><u>Inquiries:</u></p> <p>1) Peter A. Parvis, Miles and Stockbridge</p> <p><u>Letter - Board of Pharmacy - Request for Guidance</u></p> <p><u>2015 NABP Survey Physician Ownership</u></p> <p><u>Draft Board Response – physician substantial ownership</u></p> <p>Dear Mr. Parvis:</p> <p>Thank you for contacting the Maryland Board of Pharmacy concerning your request for guidance on the Board's interpretation of "owned wholly or substantially by an authorized prescriber or group</p>	<p>1 Motion from practice to accept the letter with amendments by L. Bethman, 2nd by D. Jones.</p>	<p>1. The board voted to approve the amended motion.</p>

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		<p>of authorized prescribers."</p> <p>If a physician is licensed in Maryland, the physician is prohibited from having any financial interest in a Maryland licensed pharmacy whether located in Maryland or licensed as a Maryland non-resident pharmacy. See Health Occupations Article, 14-404(a)(30), Annotated Code of Maryland.</p> <p>A Maryland licensed pharmacist, whether working at a Maryland located pharmacy or for a pharmacy licensed as a Maryland non-resident pharmacy, would be subject to discipline if the pharmacist associates as a partner, coowner, or employee of a pharmacy that is owned wholly or substantially by an authorized prescriber or group of authorized prescribers. See Health Occupations Article, 12-313(b)(14), Annotated Code of Maryland.</p> <p>Although there are no provisions in the Maryland Pharmacy Act that specify a percentage that constitutes substantial ownership, after researching the laws and regulations in other states, the Board has interpreted "owned wholly or substantially by an authorized prescriber or group of authorized prescribers" to be 10% or more ownership by an authorized prescriber or group of authorized prescribers. Proposed regulations to that effect will be forthcoming.</p> <p>Please be advised that this response was prepared with the knowledge of only the facts presented.</p>		

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		<p>Any person who wishes to republish or reproduce, in whole or in part, any material issued by the Board should contact the Board for prior consent. This response is not intended to be legal advice. Although references to current laws and regulations may be included in this response, keep in mind that laws may change annually and regulations may be changed at any time. Further, the information provided is based on state pharmacy laws and regulations. Federal rules and state requirements that are not included under the Maryland Pharmacy Practice Act, however, may also apply. To insure that all current applicable laws have been considered, you may want to consult with your own legal counsel. Board responses to inquiries are intended for guidance purposes only. As these positions do not necessarily reflect a discussion of all material considerations required to reach the conclusions stated, they are not intended to be rules, regulations, or official statements of the Board. Accordingly, due to their highly informal nature, these responses are not considered binding upon the Board and should not be relied on as definitive.</p> <p>2) Fariborz Zarfeshan</p> <p><u>Consulting for Free in AL</u></p> <p><u>Draft Board Response – Consulting in Assisted Living for free</u></p>	<p>2 Motion by committee to approve the letter as prepared, 2nd by D. Jones.</p>	<p>2. The board voted to approve this motion.</p>

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		<p>Dear Mr. Zarfeshan:</p> <p>Thank you for contacting the Maryland Board of Pharmacy concerning whether pharmacies may offer consultant pharmacist services and/or chart review services to their current Assisted Living or Nursing Home clients free of charge.</p> <p>The Maryland Pharmacy Act and Board of Pharmacy Regulations do not address offering consultant pharmacist services and/or chart review services to assisted living facilities or comprehensive care facilities free of charge.</p> <p>Please refer to federal law and regulations and the Centers of Medicare and Medicaid Services (CMS) for any requirements they may have. http://www.cms.gov/</p> <p>3) Matthew D. Balish, Pemberton Pharmacy</p> <p><u>Matthew Balish - disposal inquiry</u></p> <p><u>Draft Board Response – Drug disposal box</u></p> <p>Dear Dr. Balish:</p> <p>Thank you for contacting the Maryland Board of Pharmacy concerning Maryland’s requirements for a pharmacy that has obtained a drug disposal</p>	<p>3 Motion by committee to approve the letter as prepared, 2nd by J. Smith.</p>	<p>3. The Board voted to approve this motion.</p>

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		<p>box through the National Community Pharmacists Association (NCPA) to assist customers in disposing of unwanted prescription drugs and combating drug diversion and overdose. You also asked the Board's position regarding the recent DEA regulation permitting collection of controlled substances by pharmacies.</p> <p>Pharmacies collecting medications for disposal in Maryland are required to register as a Repository under Maryland's Prescription Drug Repository Program. Repositories are required to comply with Health-General Article, Title 15, Subtitle 6, Annotated Code of Maryland and the Code of Maryland Regulations (COMAR) 10.34.33.01 - .12.</p> <p>http://mgaleg.maryland.gov/webmga/frmStatutesText.aspx?article=ghg&section=15-601&ext=html&session=2015RS&tab=subject5</p> <p>http://www.dsd.state.md.us/comar/SubtitleSearch.aspx?search=10.34.33.*</p> <p>Applications are available on the Board's website:</p> <p>http://dhmh.maryland.gov/pharmacy/SitePages/establishmentforms.aspx</p> <p>Repositories in Maryland may collect controlled dangerous substances for</p>		

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		<p>disposal so long as they comply with the DEA laws and regulations.</p> <p>4) Stuart Yael Gordon, Consumer</p> <p><u>NPLEX question</u></p> <p><u>Draft Board Response – NPLEX – pseudoephedrine</u></p> <p>Dear Mr. Gordon:</p> <p>Thank you for contacting the Maryland Board of Pharmacy concerning the NPLEx real-time electronic logging system used by pharmacies in Maryland.</p> <p>The National Precursor Log Exchange (NPLEx) is a real-time electronic logging system used by pharmacies and law enforcement to track sales of over-the-counter (OTC) cold and allergy medications containing precursors to the illegal drug, methamphetamine. Maryland does not require using this system.</p> <p>It is the pharmacies themselves that are contracting with NPLEx and not the Board. Generally pharmacies may have policies that might be more stringent than federal or state laws. Pharmacists have professional discretion when dispensing and pharmacies in Maryland may impose their own restrictions.</p> <p>Please feel free to reach out to your local</p>	<p>4 Motion by committee to accept letter with the amendment by L. Bethman to omit the final sentence, 2nd by B. Zagnit.</p>	<p>4. The Board voted to approve this motion.</p>

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		<p>pharmacy.</p> <p>5) Adam Goldfarb, Pharmacy Manager, VCA Veterinary Referral Associates</p> <p><u>Goldfarb Veterinarian question</u></p> <p><u>Draft Board Response – Veterinarian Compounding</u></p> <p>Dear Mr. Goldfarb:</p> <p>Thank you for contacting the Maryland Board of Pharmacy concerning acquiring hospital-use compounded medications to treat animal patients. Below you find responses to your inquiries:</p> <p>1) What exactly are the rules regarding hospital use of compounded medications? Do these rules include veterinary hospitals?</p> <p>Federal regulations state that pharmacists and veterinarians may only compound an animal drug on the order of a veterinarian for an identified patient. Pharmacists and veterinarians are not permitted to compound animal drugs for office use. See 21 CFR 530.13; see also FDA Compliance Policy Guide, sec. 608.400.</p> <p>2) At the moment, it seems that neither in-state nor out-of-state compounding pharmacies will make compounded medications for us for hospital use.</p>	<p>5 Motion by committee to accept the letter a prepared, 2nd by D. Ashby.</p>	<p>5. The Board voted to approve this motion.</p>

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		<p>Is it correct that neither can legally do so?</p> <p>Yes, it is correct that in-state and out-of-state pharmacies may only compound animal drugs pursuant to a patient-specific prescription. This is based on requirements of both Maryland and federal laws. Health Occ. Art. 12-101(d) and 21 U.S.C. 353(a).</p> <p>3) The compounding pharmacies that I've talked to recently have said that though they can't send us hospital-use compounded medications, they can continue to compound with a specific patient's name on the label. However, my understanding has always been that dispensing medication labeled for one patient to another patient is illegal. Am I correct?</p> <p>A pharmacy may compound an animal drug pursuant to a prescription for an identified patient, provided that the drug is not compounded from bulk substances and is otherwise in conformance with the requirements of 21 CFR 530.13. You are correct, however, that a compounded drug for an identified patient is intended for use for only that patient.</p> <p>6) Claire Jensen, BARCS Veterinarian Compounding</p> <p><u>Vet Compounding Question</u></p>	<p>6 Motion by committee to accept the letter as prepared 2nd by B. Zagnit.</p>	<p>6. The Board voted to approve this motion.</p>

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		<p><u>Draft Board Response – BARCS - Veterinarian Compounding</u></p> <p>Dear Ms. Jensen:</p> <p>Thank you for contacting the Maryland Board of Pharmacy regarding BARCS’ ability to obtain Buprenex, Doxycycline, and Cidofovir from a compounding pharmacy for veterinarian office use.</p> <p>Both Maryland and federal laws state that a pharmacist may only compound animal drugs pursuant to an order of a veterinarian based on a valid veterinarian-client-patient relationship. Pharmacists may not compound animal drugs for office use. See 21 CFR 530.13 and Health Occ. Art. 12-101(d). If BARCS is in need of a certain drug for office use inventory, it must purchase that drug from a licensed wholesale distributor.</p> <p>Therefore, with respect to the prescription drugs referenced above, BARCS must purchase the drugs through a licensed wholesale distributor. If the drug is not commercially available in the strength or dosage form needed, a veterinarian must issue a prescription for that drug for an identified patient.</p> <p><u>Pharmacist Working Conditions Survey</u></p> <p><u>Survey Pharmacist Working Conditions Pt1 040715</u></p>	<p>Report by D. Jones Article in newsletter</p>	

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		<p><u>D. Jones presented an overview of the pharmacist working conditions survey. The working conditions survey workgroup will be meeting to discuss the results and the analysis to be completed. An article in a future board newsletter will be produced regarding the survey results.</u></p> <p><u>Naturopathic Workgroup</u></p> <p><u>D. Jones presented information regarding the naturopathic workgroup and exemptions requested by the naturopaths in the area of medications that they could prescribe. The naturopathic workgroup may have one more additional meeting.</u></p> <p><u>NFWG-BOPCategories</u></p>	<p>The board voted to comply with current Maryland regulations for naturopaths.</p> <p>Recording</p> <p>Motion from D. Jones, 2nd by M. Gavvani.</p>	<p>The Board voted to approve this motion.</p>
B. Licensing Committee	L. Bradley-Baker, Chair	<p>1. Review of Pharmacist Applications:</p> <p>a. <i>Tamer Ahmed</i> - Applicant is requesting waiver of 1500 internship hours since he has earned more than 1560 hrs through his PhD research degree. <u>Licensing Committee's recommendation:</u> Deny the waiver of internship hours.</p> <p>b. <i>Richard Collins</i> - Applicant is requesting an extension for the expiration date of his application. Application was received 02/28/2014, expired 02/28/2015</p>	<p>1a. Motion to deny request by committee, 2nd by J. Smith.</p> <p>1b. Motion to deny request by committee, 2nd by T. Robinson.</p>	<p>1a. The Board voted to approve this motion.</p> <p>1b. The Board voted to approve this motion.</p>

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		<p><u>Licensing Committee's recommendation:</u> Deny the request to extend the reciprocity application.</p> <p>c. <i>Candidate: 08627</i> - Applicant is requesting the Board's approval to take the NAPLEX exam for a 6th time. <u>Licensing Committee's recommendation:</u> The Board does not have the authority to deny a licensee from re-taking the NAPLEX, however, the Board recommends the licensee taking a NAPLEX review course prior to taking the next exam.</p> <p>d. <i>Rajeev Verma</i> - Applicant is requesting full or partial refund of fees paid to the Board in order to reciprocate his license. The Maryland license is no longer needed. <u>Licensing Committee's recommendation:</u> Deny the request for refund.</p> <p>2. Review of Pharmacy Technician Applications:</p> <p>a. <i>Yu Wei Chen</i> - Applicant for pharmacy student exemption is requesting waiver of SSN due to being international student. <u>Licensing Committee's recommendation:</u> Approve Pharmacy Student Exemption application and inform the student that on July 1, 2015 a Student Intern Registration</p>	<p>1c. Motion for recommendation by committee, 2nd by D. Jones.</p> <p>1d. Motion to deny request by committee, 2nd by C. Rochester.</p> <p>2a. Motion to approve by committee, 2nd by J. Smith.</p>	<p>1c. The Board voted to approve this motion.</p> <p>1d. The Board voted to approve this motion.</p> <p>2a. The Board voted to approve this motion.</p>

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		<p>application will have more stringent requirements.</p> <p>3. Review of Distributor Applications: <i>None</i></p> <p>4. Review of Pharmacy Applications: <i>None</i></p> <p>5. Review of Pharmacy Technicians Training Programs: <i>None</i></p> <p>6. New Business:</p> <p style="padding-left: 40px;">a. <i>IDs other than SS#</i> - Board Counsel will find out what additional documents could be used as IDs aside from SS# (e.g.: passports, driver's licenses, etc...). Ask MIS the # of characters that the MLO system can accommodate under SS# field.</p> <p><u>MIS response:</u> MLO has the ability to add a new data type where passport IDs can be entered.</p> <p style="padding-left: 40px;">b. <i>On Line Verification and Printing of licenses</i> - Would like the Board to review what steps need to be taken to print registrations online instead of a paper licenses unless upon request along with a fee.</p> <p><u>Licensing Committee Recommendation:</u> Board Counsel reported that there is no legal hindrance to the online printing of registrations rather than paper ones. Issue: Can MLO accommodate this?</p> <p style="padding-left: 40px;">c. <i>Postcard Renewal</i></p>	<p>6a. This issue will be addressed with the new MIS system.</p> <p>6b. This issue will be addressed with the new MIS system.</p>	

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		<p><i>Notifications</i> - Requesting the Board's approval to use Postcards to notify licensees of their upcoming renewals.</p> <p><u>Licensing Committee Recommendation:</u> Approve the Postcard notifications. Actual size should be ½ page and in bright yellow canary of blue color.</p>	6c. Motion to approve postcard notifications by committee, 2nd by D. Ashby.	6c. The Board voted to approve this motion.
C. Public Relations Committee	D. Jones, Chair	<p>Public Relations Committee Update</p> <p>The recognition for former Board Secretary Harry Finke will be held directly following the April 2015 Board Meeting.</p> <p>The next event that the board's Public Relations staff/committee will be attending is the 2015 Baltimore Flowermart, which will be held on Friday, May 1st.</p> <p>The Maryland Board of Pharmacy has been invited to MPhA convention in June 2015 in Ocean City, MD to present the results of the Pharmacist Working Conditions Survey via panel discussion.</p>		
D. Disciplinary	J. Smith, Chair	<p>Disciplinary Committee Update</p> <p><i>None at this time.</i></p>		
E. Emergency Preparedness Task Force	S. Roy, Chair	<p>Emergency Preparedness Task Force Update</p> <p><i>None at this time.</i></p>		
IV. Other Business & FYI	L. Israbian-Jamgochian,	The following question was asked by a member of the audience:	The question was not answered during the open meeting.	The pharmacist submitted his contact

Subject	Responsible Party	Discussion	Action Due Date (Assigned To)	Results
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	Board President	<i>Can a cashier in a pharmacy come behind the counter to only bag prescriptions that have been previously prepared?</i>		information in order to be sent the answer in writing.
V. Adjournment	L. Israbian-Jamgochian, Board President	<p>The Public Meeting was adjourned at 10:55.</p> <p>At __11:05__ A.M. L. Israbian-Jamgochian convened a Closed Public Session to conduct a medical review of technician applications.</p> <p>C. The Closed Public Session was adjourned at 11:38 _____AP.M. Immediately thereafter, L. Israbian-Jamgochian convened an Administrative Session for purposes of discussing confidential disciplinary cases. With the exception of cases requiring recusals, the Board members present at the Public Meeting continued to participate in the Administrative Session.</p>	Motion to close the Public Meeting by D. Jones, 2 nd by Z. St. Cyr, II.	The Board voted to approve this motion.