Board Meeting

January 25, 2017
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NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the Board may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
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NOTICE IS HEREBY GIVEN that a meeting of the Board has been ordered and called for 8:30 a.m. on Wednesday, January 25, 2017 at the Board office, for the purpose to wit:

AGENDA

NOTE: This agenda is tentative until 24 hours in advance of the meeting, at which time the most recent revision becomes official.

Revised 01-18-2017

1. Call to Order
2. Invocation & Pledge of Allegiance
3. Quorum Call
4. Call for Additional Agenda Items & Adoption of Agenda
5. Consideration of Minutes from Previous Meeting – November 16, 2016
6. Report on Action Items
7. Confirmation of Acts
8. Opportunity for Public Comment
9. Special Orders of the Day
   A. Presentation of Distinguished Service Awards – Pamela G. Reed & Deborah H. Simonson
   B. Office of the Legislative Auditor – Legislative Subpoena for Copy of PMP Database
10. Committee Reports
    A. Finance – Mr. Pitre
       • Consideration of Interim Report for Fiscal Year 2016-2017
    B. Application Review – Mr. Soileau
    C. Reciprocity – Ms. Hall
    D. Violations – Mr. Bond
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       • Consideration of Proposed Voluntary Consent Agreements
    L. Executive Director – Mr. Broussard
12. Special Presentation – Ms. Milano
13. Announcements
14. Recess

NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the Board may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
Acronyms

AACP  American Association of Colleges of Pharmacy
AAPS  American Association of Pharmaceutical Scientists
AAPT  American Association of Pharmacy Technicians
ACA  American College of Apothecaries
ACME  Accreditation Council for Continuing Medical Education
ACCP  American College of Clinical Pharmacy
ACE  Advisory Committee on Examinations (NABP)
ACPE  Accreditation Council for Pharmacy Education
ADA  American Dental Association
ADC  automated dispensing cabinet
ADS  automated dispensing system
AFDO  Association of Food & Drug Officials
AFPE  American Foundation for Pharmaceutical Education
AIHP  American Institute of the History of Pharmacy
AMA  American Medical Association
AMCP  Academy of Managed Care Pharmacy
AMS  automated medication system
APEC  Australian Pharmacy Examining Council
APhA  American Pharmacists Association
APPE  advanced pharmacy practice experience
ASAE  American Society of Association Executives
ASAP  American Society for Automation in Pharmacy
ASCP  American Society of Consultant Pharmacists
ASHP  American Society of Health-System Pharmacists
ASPL  American Society for Pharmacy Law
AVMA  American Veterinary Medical Association
AWARxE  NABP consumer protection program
BNDD  Bureau of Narcotics and Dangerous Drugs
BPS  Board of Pharmacy Specialties
CAC  Citizen Advocacy Center
CCAPP  Canadian Council for Accreditation of Pharmacy Programs
CCGP  Commission for Certification in Geriatric Pharmacy
CDC  Centers for Disease Control and Prevention
CDER  Center for Drug Evaluation and Research
CDTM  collaborative drug therapy management
CDS  controlled dangerous substances
CE  continuing education
CFR  Code of Federal Regulations
CHPA  Consumer Healthcare Products Association
CLEAR  Council on Licensure, Enforcement and Regulation
CMI  consumer medication Information
CMS  Centers for Medicare and Medicaid Services
CPD  continuing professional development
CPhA  Canadian Pharmacists Association
CPPA  Center for Pharmacy Practice Accreditation
CPSC  Consumer Product Safety Commission
DEA  Drug Enforcement Administration
DEQ  La. Department of Environmental Quality
DHH  La. Department of Health and Hospitals

Revised 2014-0501
PCMA  Pharmaceutical Care Management Association
PCOA  Pharmacy Curriculum Outcomes Assessment (NABP)
PDMA  Prescription Drug Marketing Act
PEBC  Pharmacy Examining Board of Canada
PhRMA  Pharmaceutical Research and Manufacturers of America
PMP  Prescription Monitoring Program
PMP-i  Prescription Monitoring Program Interconnect (NABP)
PTCB  Pharmacy Technician Certification Board
PTCE  Pharmacy Technician Certification Examination
PTEC  Pharmacy Technician Educators Council
RFID/EPC  Radio Frequency Identification / Electronic Product Code
SAMSHA  Federal Substance Abuse & Mental Health Services Administration
TJC  The Joint Commission
TOEFL  Test of English as a Foreign Language
TOEFL iBT  Test of English as a Foreign Language Internet-based Test
TSE  Test of Spoken English
URAC  Utilization Review Accreditation Commission
USP  United States Pharmacopeia / United States Pharmacopeial Convention
USP DI  US Pharmacopeia Dispensing Information
USP-NF  US Pharmacopeia – National Formulary
VAWD  Verified-Accredited Wholesale Distributors (NABP)
Vet-VIPPS  Veterinary-Verified Internet Pharmacy Practice Sites (NABP)
VIPPS  Verified Internet Pharmacy Practice Sites (NABP)
VPP  Verified Pharmacy Practice (NABP)
WHO  World Health Organization
WHPA  World Health Professions Alliance
Consideration of Minutes from Previous Meetings
Minutes

Regular Meeting
& Administrative Hearing

Wednesday, November 16, 2016 at 9:00 a.m.
Wednesday, November 16, 2016 at 2:00 p.m.
Thursday, November 17, 2016 at 8:30 a.m.

Location:
Louisiana Board of Pharmacy
3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
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A regular meeting of the Louisiana Board of Pharmacy was held on Wednesday, November 16, 2016 in the Boardroom of the Board’s office, located at 3388 Brentwood Drive in Baton Rouge, Louisiana. The meeting was held pursuant to public notice, each member received notice, and notice was properly posted.

1. *Call to Order*
Mr. Carl Aron, President, called the meeting to order at 9:05 a.m.

2. *Invocation & Pledge*
Mr. Aron called upon Mr. Brian Bond, and he delivered the invocation. Ms. Chris Melancon then led the group in the recitation of the Pledge of Allegiance.

At this point, Mr. Aron acknowledged the Governor’s recent appointments to the Board in late August and early September. In particular:

- Mr. Allen W. Cassidy comes from District 7 and replaces Mr. Ryan Dartez, who completed one term of service. Mr. Aron noted Mr. Cassidy’s prior service on the Board, serving a term from 2004 to 2010.
- Mr. Richard Mannino comes from District 6 and replaces Ms. Pam Reed, who completed one term of service.
- Mr. Douglas Robichaux comes from District 4 and he replaces Mr. Clovis Burch, who completed one term of service.
- Dr. Raymond Strong comes from District 2 and he replaces Dr. Deborah Simonson, who completed one term of service.
- Mr. Richard Indovina comes from District 1, and he was re-appointed to a second term of service.
- Mr. Don Resweber is a public member; he was appointed in 2011 by Gov. Jindal, and he has been re-appointed by Gov. Edwards. Mr. Aron noted the unusual nature of the public member appointment by successive governors.

3. *Quorum Call*
Mr. Aron called upon the Secretary, Mr. Bond, to call the roll to establish a quorum.

**Members Present:**
- Mr. Carl W. Aron
- Mr. Brian A. Bond
- Mr. Allen W. Cassidy, Jr.
- Ms. Jacqueline L. Hall
- Mr. Richard M. Indovina, Jr.
- Mr. Richard Mannino
- Mr. Marty R. McKay
- Ms. Chris B. Melancon
- Ms. Diane G. Milano
- Mr. Blake P. Pitre
- Mr. T. Morris Rabb
- Mr. Don L. Resweber
- Mr. Douglas E. Robichaux
- Mr. Richard A. Soileau
Members Absent:  
Mr. Ronald E. Moore

Staff Present:  
Mr. Malcolm J. Broussard, Executive Director  
Mr. Carlos M. Finalet, III, General Counsel  
Mr. M. Joseph Fontenot, Assistant Executive Director  
Mr. Benjamin S. Whaley, Chief Compliance Officer

Guests:  
Mr. Errol Duplantis – Pharmacist  
Mr. Robert Rock – Pharmacist  
Mr. Joey Sturgeon – Silvergate Pharmaceuticals  
Ms. Meghan Chilcott – Fred’s Pharmacy  
Mr. Audrie Bellard – Bellard’s Pharmacy  
Mr. Ben J. Sims – Brookshire Grocery Co.  
Ms. Connie Tinnerello – Channell Drugs  
Mr. Michael Tinnerello – Bernard’s Pharmacy  
Mr. Council Powell – CVS Pharmacy  
Mr. Ralph C. Daigle – Pharmacist Gold Certificate Recipient  
Ms. Kelley Henderson – La. Pharmacists Association  
Mr. Gregory Poret – Pharmacist  
Ms. Kimberly Wixson – La. Pharmacists Association  
Mr. Nick Cahanin – National Association of Chain Drug Stores  
Ms. Erin Robicheaux – National Association of Chain Drug Stores  
Mr. Edmond Doucette – Pharmacist Gold Certificate Recipient  
Mr. Randal Johnson – La. Independent Pharmacies Association  
Ms. Linda Spradley – Spradley & Spradley  
Mr. Bud Courson – Courson & Nickel  
Dr. Barries Leung – Ochsner Medical Center – Kenner Pharmacy

Mr. Bond certified 16 of the 17 members were present, constituting a quorum for the conduct of official business.

4. Call for Additional Agenda Items & Adoption of Agenda  
Mr. Aron asked if there were any additional agenda items but none were requested. With no further requests for amendment, and with no objection, the Board adopted the posted agenda dated November 13, 2016. Mr. Aron then requested authority from the Board to reorder the agenda as necessary for the purpose of accommodating certain guests. There were no objections to that request.

5. Consideration of Minutes  
Mr. Aron reminded the members they had received the draft minutes from the Regular Board Meeting on August 10, 2016 and the Administrative Hearing on August 11, 2016,
both of which were held in Baton Rouge, Louisiana. With no objections, he waived the reading of the draft minutes. With no requests for amendment or any objection to their approval, Mr. Aron declared the minutes were approved as presented. Mr. Bond reminded the members to sign the Minute Book.

6. **Report on Action Items**
Mr. Aron called on Mr. Broussard for the report. Mr. Broussard reviewed the action items contained in the report which was posted in the meeting binder. There were no questions from the members.

7. **Confirmation of Acts**
Pursuant to Mr. Aron’s declaration that the officers, committees, and executive director had attended to the business of the Board since the last meeting in accordance with policies and procedures previously approved by the Board, Mr. Rabb moved, **Resolved**, that the actions taken and decisions made by the Board officers, Board committees, and Executive Director in the general conduct and transactions of Board business since August 11, 2016 are approved, adopted, and ratified by the entire Board.
The motion was adopted after a unanimous vote in the affirmative.

8. **Opportunity for Public Comment**
Mr. Aron reminded the members and guests the Open Meetings Law requires all public bodies to provide an opportunity for public comment at all meetings and for each agenda item upon which a vote is to be taken. He solicited general comments on non-agenda items from the guests present, and Mr. Errol Duplantis requested an opportunity to be heard. Mr. Aron invited him to offer his comments at that time.
Mr. Duplantis indicated he represented the La. Pharmacists Association and wished to present information concerning a resolution adopted at that organization’s annual meeting in July 2016. In particular, the members of the association voted to request the Board of Pharmacy seriously discuss legislative options for PBM and PSAO oversight by the Board in lieu of the current model of oversight under the Dept. of Insurance.

* **Statement of Purpose**
Mr. Aron reminded the members of the purpose and mission of the Board of Pharmacy by reciting the relevant portion of the Louisiana Pharmacy Practice Act. He urged the members to keep their mission in mind as they considered all the matters before them.

9. **Annual Election of Board Officers**
Mr. Aron reminded the members and guests the Board has five officer positions and that the Board conducts their annual election of officers during the last scheduled meeting of a calendar year, typically in November. He reviewed the procedures to be used during the election process. When he opened the nominations for the office of President, Mr. Valentine offered a substitute motion, **Resolved**, to nominate and elect by acclamation all of the existing officers in their same positions.
The motion was adopted after a unanimous vote in the affirmative. Mr. Aron expressed
his appreciation and announced the officers just elected:
    President – Carl W. Aron, from District 5;
    1st Vice President – T. Morris Rabb, from District 5;
    2nd Vice President – Marty R. McKay, from District 8;
    3rd Vice President – Chris B. Melancon, from District 7; and
    Secretary – Brian A. Bond, from District 8.

10. Special Orders of the Day
    Presentation of Pharmacist Gold Certificates
Mr. Aron reported the Board issued 142 new pharmacist licenses during 1966, and of that number, 50 pharmacists had maintained their license for 50 years and were eligible to receive their Pharmacist Gold Certificates in 2016. He then informed the members that two of those pharmacists were present that day to receive their certificates, although one of them had not yet arrived. Mr. Aron then recognized Mr. Ralph C. Daigle. He briefly reviewed highlights of Mr. Daigle’s pharmacy career, presented his certificate, and encouraged him to offer his own comments. The members and guests present congratulated Mr. Daigle with a generous round of applause.

    Presentation of Distinguished Service Award
Mr. Aron reminded the members of the new appointments made by the Governor and that one of the pharmacists completing their term of service on the Board was present. He invited Mr. Clovis Burch to the front of the room. Mr. Aron informed the members and guests that Mr. Burch had actually served several terms – from 1980 through 1992, again from 1996 through 2004, and from 2010 through 2016 – totaling 24 years in service to the Board, some of that time in leadership as President of the Board. Mr. Burch expressed his appreciation for the opportunity of service as well as for the recognition that day. The members and guests present congratulated him with a generous round of applause.

11. Committee Reports
    A. Finance Committee
    Mr. Aron called upon Mr. Pitre for the committee report. Mr. Pitre reported the committee had met the previous day to review two documents prepared by the staff. Mr. Pitre directed the members to the interim report for the current fiscal year, reviewed the highlights, and indicated the report was presented for information only and required no action by the Board. He then directed the members to the Proposed Budget for Fiscal Year 2017-2018. He indicated the committee members had reviewed the proposal and voted to recommend the adoption of the proposed budget as presented. He then moved,
    Resolved, to approve and adopt the Proposed Budget for Fiscal Year 2017-2018.
The motion was adopted after a unanimous vote in the affirmative.
    Finally, he expressed his appreciation to the other committee members for their efforts the previous day.
    
    B. Application Review Committee
    Mr. Aron called upon Mr. Soileau for the committee report. Mr. Soileau
reported the committee met on September 27 to consider six referrals from the staff. Following their interviews of the applicants and subsequent deliberations, the committee authorized the issuance of two PTC registration, two PHY permits, and one DME permit. Mr. Soileau then presented the following file to the Board for their consideration of the committee recommendations.

**Kumisa Rene’s Walker (Applicant for PTC Registration)** Mr. Soileau moved to deny the application and refuse to issue the credential. The motion was adopted after a unanimous vote in the affirmative. The Board denied the application and refused to issue the registration.

Finally, Mr. Soileau expressed his appreciation to the other members of the committee for their ongoing efforts.

**C. Reciprocity Committee**
Mr. Aron called upon Ms. Hall for the committee report. She reported the staff had evaluated 71 applications for pharmacist licensure by reciprocity since the last Board meeting and than none of them contained information that warranted a committee level review. In conformance with policies and procedures previously approved by the Board, the staff approved the applications and issued the credentials.

Ms. Hall then reported staff had referred one applicant to the committee, and the committee had interviewed that applicant earlier that same day. Following their interview and deliberation, the committee recommended the approval of the application and the issuance of a license without restriction. On behalf of the committee, Ms. Hall moved, **Resolved**, that the Board approve the application for a pharmacist license by reciprocity and authorize the issuance of a pharmacist license, without restriction, to Eric James Smith.

The motion was adopted after a unanimous vote in the affirmative.

Finally, she closed the report with appreciation to the other committee members for their ongoing efforts.

**D. Violations Committee**
Mr. Aron called upon Mr. Bond for the committee report. Mr. Bond reported the committee held preliminary hearings on September 21-22 to consider their posted agenda, which included 29 cases: eight pharmacists, one pharmacy intern, seven pharmacy technicians, two pharmacy technician candidates, and eleven pharmacy permits. After interviews and deliberations at the meeting, the committee granted four continuances and took no formal action against nine of the respondents. Seven of the respondents failed to appear and the committee did not offer any proposals to them; of those seven respondents, four were scheduled for the formal hearing the following day and the other three have been deferred until a later hearing date. The committee issued non-disciplinary letters of non-compliance to two of the respondents and one pharmacist voluntarily surrendered his license. The
committee then offered proposed voluntary consent agreements to the remaining six respondents. All of the respondents accepted their proposed consent agreements, and Mr. Bond presented those proposed agreements to the members for their consideration.

Kristen Je’Nay Williams (PTC.021994) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion failed, receiving a minority of the votes cast. Members objecting were Mr. Cassidy, Ms. Hall, Mr. Indovina, Mr. Mannino, Mr. McKay, Ms. Milano, Mr. Resweber, and Mr. Soileau. Mr. Aron directed staff to notify the respondent and schedule the administrative hearing.

Sabrina Marie Malbrough (CPT.011889) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion was adopted after a majority vote in the affirmative; Mr. Mannino, Ms. Milano, Mr. Resweber, and Mr. Soileau objected. The Board issued a Letter of Warning, and further, assessed administrative costs.

Kmart Corporation d/b/a Kmart Pharmacy No. 3016 [Bossier City, LA] (PHY.002058) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board assessed a fine of $5,000 plus investigative and administrative costs.

Daanaa Raajih Richard (PNT.047724) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion was adopted after a majority vote in the affirmative; Ms. Milano objected. The Board suspended the intern registration for five years and stayed the execution of the suspension, then placed the intern registration, and any subsequent credential, on probation for five years, effective November 16, 2016, subject to certain terms enumerated in the consent agreement, and further, assessed administrative costs.

Apothecare, LLC d/b/a Apothecare [Meadville, MS] (PHY.007269) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board assessed a fine of $50,000 plus administrative and investigative costs.

AmeriPharm, Inc. d/b/a MedVantx Specialty Pharmacy [Louisville, KY] (PHY.007091) Mr. Bond moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board assessed a fine of $5,000 plus administrative and investigative costs.

Mr. Bond reported the committee will meet on December 14-15, 2016 to consider that docket, which was still under development.

Finally, Mr. Bond concluded his report with appreciation to the other
committee members for their ongoing efforts.

E. Impairment Committee

Mr. Aron called upon Mr. Rabb for the committee report. Mr. Rabb reported the committee met the previous day to consider four referrals from the staff. Following their interviews of the applicants and subsequent deliberations, the committee took no action for two of the respondents. Mr. Rabb then presented the following files to the members for their consideration.

**Tiffany Annette Pitre (CPT.001615)** Mr. Rabb moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board granted the respondent’s request for reinstatement of the previously suspended certificate, converted the duration of the suspensive period from an indefinite term to a term of five years and stayed the execution of the suspension, then placed the certificate on probation for five years, effective November 16, 2016, subject to certain terms enumerated in the consent agreement.

**Leo Gerard Riche (PST.014961)** Mr. Rabb moved to grant the respondent’s request for early termination of the probationary period. The motion was adopted after a unanimous vote in the affirmative. The Board terminated the probationary period, originally scheduled to conclude on August 5, 2019, and then restored the license to active and unrestricted status.

Finally, Mr. Rabb closed his report with appreciation to his fellow committee members for their work the previous day and for the ongoing staff support.

F. Reinstatement Committee

Mr. Aron called upon Ms. Melancon for the committee report. Ms. Melancon reported the committee met the previous day to consider four referrals from staff. She then presented the following files to the members for their consideration.

**Heidi Nicole Leger (CPT.008316)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board granted respondent’s request for reinstatement of the previously lapsed certificate, contingent upon the successful completion of certain requirements identified in the consent agreement.

**Tahirih LaSyne Greene (CPT.002935)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board granted respondent’s request for reinstatement of the previously lapsed certificate, contingent upon the successful completion of certain requirements identified in the consent agreement.
agreement.

**Brittany Fallon Claverie (CPT.005450)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board granted respondent’s request for reinstatement of the previously lapsed certificate, contingent upon the successful completion of certain requirements identified in the consent agreement.

**Angela Nicole Hotard (PST.016604)** Ms. Melancon moved to grant respondent’s request for early termination of the probationary period. The motion was adopted after a unanimous vote in the affirmative. The Board terminated the probationary period, originally scheduled to conclude on February 24, 2017, and then restored the license to active and unrestricted status.

Ms. Melancon then reported a licensing procedure issue identified by the staff, as well as two proposals from the staff to address those issues. With respect to the reinstatement of CDS licenses held by practitioners which the Board of Pharmacy suspended based on disciplinary action taken against their primary professional license by their primary licensing agency, the Board’s current rules require a hearing before the Board. Staff has suggested that when the primary licensing agency reinstates a previously revoked or suspended primary professional license, any further inquiry by the Board of Pharmacy on the reinstatement of the CDS license would be duplicative. More importantly, the time between quarterly meetings of the Board of Pharmacy would delay the restoration of the practitioner’s ability to fully manage his patients’ drug therapy. In order to streamline the process and reinstate the CDS license as soon as possible, staff has suggested (1) an amendment to the current rule, and (2) an amendment to the current Reinstatement Committee policy, and (3) a new licensing procedure policy.

Ms. Melancon reported the Reinstatement Committee considered the proposed amendment to the current rule as well as the proposed amendment to the current committee policy during their meeting the previous day, and that the Executive Committee had considered proposed new licensing procedure policies the previous day and would report on those proposed policies during their report later that day. She then informed the members the Reinstatement Committee had voted to recommend the approval of both proposals. On behalf of the committee, she then moved,

**Resolved**, to approve Regulatory Proposal 2016-H ~ Reinstatement of CDS Licenses (Draft #1), and further, to authorize the Executive Director to promulgate the proposed amendment upon the instruction of the President, and further, to authorize the President to approve acceptable amendments as may become necessary during the promulgation process.

The motion was adopted after a unanimous vote in the affirmative. Ms. Melancon then moved,
Resolved, to approve the proposed amendments to the Board’s Policy & Procedure Manual, more specifically at PPM.I.B.5.a – Reinstatement Committee.

The motion was adopted after a unanimous vote in the affirmative.

Ms. Melancon closed her report with appreciation to the other committee members for their work the previous day.

G. Tripartite Committee

Mr. Aron noted the committee had not met since the last Board meeting and therefore no report was available.

At this point, Mr. Aron declared a luncheon recess. It was noted the members recessed at 10:50 a.m., reconvened at 12:15 p.m., and resumed the posted agenda.

Mr. Aron noted the presence of an award recipient, and then reverted to the earlier agenda item.

10. Special Orders of the Day – Presentation of Pharmacist Gold Certificate

Mr. Aron then recognized Mr. Edmond J. Doucette. He briefly reviewed highlights of Mr. Doucette’s pharmacy career, presented his certificate, and encouraged him to offer his own comments. The members and guests present congratulated Mr. Doucette with a generous round of applause.

At this point, Mr. Aron returned to the sequence of the posted agenda.

11. Committee Reports (cont.)

H. Regulation Revision Committee

Mr. Aron called on Mr. McKay for the committee report. Mr. McKay reported the committee had met once since the previous board meeting. During that September 27 meeting, the members reviewed all of the new assignments from the August Board meeting as well as all of the remaining items on the agenda. They established priorities, noting some tasks have shorter deadlines than others. They set their next meeting date for December 6, during which they will focus on the specialty drugs topic requested from SCR 87 of the 2016 Legislature. They also set the following meeting date for January 12, 2017, during which they will focus on the final report required by SCR 87 as well as other legislative proposals intended for consideration during the 2017 legislative session.

Mr. Aron recalled the public comment offered at the beginning of the meeting that day; he then referred the topic of pharmacy benefit managers to the committee and requested the development of a proposal for the Board’s consideration.

Mr. McKay closed his report with appreciation to the other members of the committee for their ongoing efforts.
I. Executive Committee

Mr. Aron reported the committee had met the previous day to consider the items on their posted agenda. In particular, the committee reviewed the current Emergency Rules, the proposed rule recommended by the Reinstatement Committee, as well as proposed new policies relative to licensing procedures. The committee developed several recommendations for the Board’s consideration. Mr. Aron requested Mr. Rabb to offer those motions. Mr. Rabb moved,

Resolved, to amend LAC 46:LIII.905.A.3.b, relative to the accreditation requirement for pharmacy technician training programs, to change the implementation date from January 1, 2016 to January 1, 2018.

The motion was adopted after a unanimous vote in the affirmative. Mr. Rabb then moved,

Resolved, to approve the Declaration of Emergency for Accreditation of Pharmacy Technician Training Programs, to set the effective date of the revised Emergency Rule as November 17, 2016, and further, to authorize the Executive Director to re-issue this revised Emergency Rule as needed until the final rule is promulgated.

The motion was adopted after a unanimous vote in the affirmative. Mr. Rabb then moved,

Resolved, to authorize the Executive Director to re-issue the original Emergency Rule titled Standing Orders for the Distribution of Naloxone as needed until the final rule is promulgated.

The motion was adopted after a unanimous vote in the affirmative. Mr. Rabb then moved,

Resolved, to approve the Declaration of Emergency for Reinstatement of CDS Licenses, to set the effective date as November 17, 2016, and further, to authorize the Executive Director to re-issue this Emergency Rule as needed until the final rule is promulgated.

The motion was adopted after a unanimous vote in the affirmative. Mr. Rabb then moved,

Resolved, to approve Section IV – Licensing Procedures, including Policies IV.A through IV.F, for the Board’s Policies & Procedures Manual.

The motion was adopted after a unanimous vote in the affirmative.

Finally, Mr. Aron closed his report with appreciation for the other committee members and their work the previous day.

12. Staff Reports

J. Report of Assistant Executive Director

Mr. Fontenot reviewed progress on staffing changes authorized during the Board’s August 2016 meeting; he introduced Mr. Ben Whaley, who has been working as a pharmacist compliance officer. He announced Mr. Whaley had been promoted to Chief Compliance Officer on October 31, 2016. He also
noted the territorial boundaries were under revision in preparation for posting the position announcement for a new staff compliance officer.

He then directed the members to the quarterly report for the Prescription Monitoring Program, reviewing transaction data, registration counts, and search data. In addition, he reviewed data for specific drugs – hydrocodone, tramadol, and oxycodone, showing numbers of prescriptions and units dispensed for the past several years. He then reviewed data from the PMP Interconnect and the Gateway, showing numbers of requests arriving from other states as well as interstate requests originating from within the state.

He then directed the members to the requests for exemption from the PMP reporting requirements. Mr. Pitre moved,

Resolved, to authorize the issuance of PMP reporting waivers to:
> PHY.007361-NR – AllCare Specialty Pharmacy (AR);
> PHY.007362-NR – Baxter Healthcare Corporation (IL);
> PHY.006253-HOS – Central La. Surgical Hospital (LA);
> PHY.005474-NR – CVS Caremark (IL);
> PHY.006209-NR – DCRX Infusion/Patient Care America (FL);
> PHY.007308-NR – MacDill Pharmacy (FL);
> PHY.006762-NR – Marian Respiratory Care (AL);
> PHY.007351-NR – MedStar Pharmacy (FL);
> PHY.006890-NR – New Life Pharmacy (UT);
> PHY.007383-NR – Pharmacy Incorporated (KY);
> PHY.007334-NR – Reliance RX (NY);
> PHY.006738-NR – SimfaRose Pharmacy (FL);
> PHY.007369-NR – Solara Medical Supplies (CA);
> PHY.007352-NR – Stanley Pharmacy Compounding Center (AR);
> PHY.005817-NR – Transcript Pharmacy (MS);
> PHY.007206-NR – US Med (FL); and
> PHY.007375-NR – Value Pharmacy (CA);

once they have executed the standard consent agreement for that purpose.

The motion was adopted after a unanimous vote in the affirmative. Finally, Mr. Fontenot indicated completion of his report.

K. Report of General Counsel

Mr. Aron called upon Mr. Finalet for his report. Mr. Finalet then presented the following files to the members for their consideration.

Sandra Ann Charlot (CPT.011354) Ms. Hall moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board revoked the certificate, effective August 22, 2016, and further, permanently prohibited the acceptance of any future application for the reinstatement of the certificate or for any other credential issued by the Board.

Ashley Marie Campbell (CPT.010201) Ms. Hall moved to approve the proposed voluntary consent agreement. The motion was adopted after a
unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Birdell Singleton Nichols (CPT.011443)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Heidi Ann Waites (CPT.009477)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**April Graham Picou (CPT.011123)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Alicia Darnell Johnson (CPT.011194)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Charlene Renee Simon (CPT.007131)** Ms. Milano moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board revoked the certificate, effective October 10, 2016, and further, permanently prohibited the acceptance of any future application for the reinstatement of the certificate or for any other credential issued by the Board.

**Bianca Lanay Moore (CPT.012621)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Toya Marie Morris (CPT.009164)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Marie Anquinett Walker (CPT.009576)** Ms. Melancon moved to approve the proposed voluntary consent agreement. The motion was adopted after a unanimous vote in the affirmative. The Board issued a Letter of Reprimand, and further, assessed a fine of $250 plus administrative costs.

**Alissa Ann Henry (CPT.010953)** Ms. Melancon moved to accept the voluntary surrender of the credential. The motion was adopted after a
unanimous vote in the affirmative. The Board accepted the voluntary surrender, resulting in the active suspension of the certificate for an indefinite period of time, effective September 16, 2016.

Alvin Watts, III (PST.018168) Ms. Melancon moved to accept the voluntary surrender of the credential. The motion was adopted after a unanimous vote in the affirmative. The Board accepted the voluntary surrender, resulting in the active suspension of the license for an indefinite period of time, effective October 17, 2016.

Morris Albert Lottinger, II (PST.013756) Ms. Melancon moved to accept the voluntary surrender of the credential. The motion was adopted after a unanimous vote in the affirmative. The Board accepted the voluntary surrender, resulting in the active suspension of the license for an indefinite period of time, effective October 17, 2016.

Timothy Keith Freeman (PST.020918) Ms. Melancon moved to accept the voluntary surrender of the credential. The motion was adopted after a unanimous vote in the affirmative. The Board accepted the voluntary surrender, resulting in the active suspension of the license for an indefinite period of time, effective September 9, 2016.

John Gibson Fasick, II (CDS.027692-DPM) Mr. Rabb moved to suspend the CDS license, based on the suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective May 9, 2016.

Benjamin Andrew Deaton (CDS.046975-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective June 7, 2016.

Leia Ann Frickey (CDS.024813-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of her medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective May 6, 2016.

Kapil Harilal Thakker (CDS.041988-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective June 29, 2016.
Shannon Christopher Ceasar (CDS.037007-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective August 30, 2016.

J. Foster Chapman (CDS.037673-MD) Mr. Rabb moved to suspend the CDS license, based on the surrender of his federal registration to the U.S. Drug Enforcement Administration. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective August 15, 2016.

Frederick William Floyd, III (CDS.027311-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective September 1, 2016.

Dorothy Webb Minor (CDS.033772-APN) Mr. Rabb moved to suspend the CDS license, based on the surrender of her federal registration to the U.S. Drug Enforcement Administration. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective August 30, 2016.

Kelly Elizabeth Rachal (CDS.036320-DVM) Mr. Rabb moved to suspend the CDS license, based on the surrender of her federal registration to the U.S. Drug Enforcement Administration. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective September 2, 2016.

Kenneth Gregory Stephens (CDS.035848-MD) Mr. Rabb moved to suspend the CDS license, based on the summary suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective September 2, 2016.

Arnold Erwin Feldman (CDS.022668-MD) Mr. Rabb moved to suspend the CDS license, based on the suspension of his medical license by the La. State Board of Medical Examiners. The motion was adopted after a unanimous vote in the affirmative. The Board suspended the CDS license for an indefinite period of time, effective October 20, 2016.

Mr. Finalet then reviewed his participation on the SCR 65 Task Force and the issues being examined and some potential recommendations that might be made to the legislature in the final report from the task force.

Finally, Mr. Finalet indicated the completion of his report.
L. Report of Executive Director

Mr. Aron called upon Mr. Broussard for the report. Mr. Broussard directed
the members to his report which was posted in the Boardroom Library prior
to the meeting; it was also included in the meeting binder. He reviewed the
following topics:

- Meeting Activity
- Reports
  - Census Reports – Credentials & Compliance Divisions
  - Production Reports – Credentials Division
  - Exceptions Report
  - Annual Report

Mr. McKay moved,

**Resolved,** to approve the *Annual Report for Fiscal Year 2015-2016,* and further, to direct a copy to the
Office of the Governor, and further, to publish the
report on the Board’s website.

The motion was adopted after a unanimous vote in the
affirmative.

- Examinations
  - MPJE
  - NAPLEX
  - PARE
  - PTCB
- Operations
  - Credentials Division
  - Compliance Division
  - Administrative Division
- State Activities
  - La. Board of Drug & Device Distributors
  - La. State Board of Medical Examiners
  - La. Dept. of Health – Bureau of Health Services Finances
  - La. Physical Therapy Board
  - La. Dept. of Health – Office for Citizens with Developmental
Disabilities
  - La. State Radiologic Technology Board of Examiners
  - La. Dept. of Health – Office of Public Health
- Regional & National Activities
  - Accreditation Commission for Health Care (ACHC)
  - [coalition of multiple organizations]
  - Food & Drug Administration (FDA)
  - Drug Enforcement Administration (DEA)
  - National Association of Boards of Pharmacy (NABP)
  - NABP-AACP District 6
  - MALTAGON
- International Activities
  - International Pharmaceutical Federation (FIP)
Finally, Mr. Broussard indicated the completion of his report.

13. **Request for Information from University of South Carolina - Columbia**
Mr. Aron requested Mr. Broussard review the request from the University of South Carolina. Mr. Broussard directed the members to the list of questions posed in the request. He reported he had contacted the Executive Director of the South Carolina Board of Pharmacy for a referral to the University of South Carolina College of Pharmacy, to query that institution for additional information before we attempted to answer their questions. He suggested a few different actions to respond to the request, depending on the information he received from his queries to South Carolina. Until the request is clarified, he suggested the matter remain pending on the Board’s agenda. There were no objections to that suggestion.

14. **Announcements**
Mr. Aron directed the members to the announcements in their meeting binder. Mr. Broussard directed the members to the list of tentative meeting dates for the Board for Calendar Year 2017.

15. **Recess**
Having completed the tasks itemized on the posted agenda, with no further business pending before the Board, and without objection, Mr. Aron recessed the meeting at 2:35 p.m.

*    *   *   *   *

An Administrative Hearing was convened on Wednesday, November 16, 2016 in the Boardroom of the Board’s office, located at 3388 Brentwood Drive in Baton Rouge, Louisiana. The hearing was held pursuant to public notice, each member received notice, each respondent received notice (unless specifically stated otherwise in the official transcript), and notice was properly posted.

A. **Call to Order**
Mr. Aron called the meeting to order at 3:10 p.m.

B. **Quorum Call**
Mr. Aron called upon Secretary Bond and he called the roll. After doing so, he certified Mr. Moore was absent; however, the remaining 16 members were present, constituting a quorum for the conduct of official business.

C. **Call for Additional Agenda Items & Adoption of Agenda**
Mr. Aron asked if there were any additional agenda items, and none were requested. With no objection, the Board adopted the posted agenda, dated November 5, 2016. He then requested authority to re-order the agenda as may become necessary, and there was no objection to that request.

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* Statement of Purpose
Mr. Aron reminded the members of the purpose and mission of the Board of Pharmacy by reciting the relevant portion of the Louisiana Pharmacy Practice Act. He urged the members to keep their mission in mind as they considered all the matters before them.

D. Opportunity for Public Comment
Mr. Aron reminded the members and guests the Open Meetings Law requires all public bodies to provide an opportunity for public comment at all meetings and prior to the vote on each agenda item. He solicited comments from the guests, but none were offered.

Appearances
Mr. Aron indicated he would serve as the Hearing Officer, Ms. Celia R. Cangelosi and Mr. Carlos Finalet as the Prosecuting Attorneys, Mr. Mark LaCour as the Official Recorder, and Mr. Malcolm Broussard as the Hearing Clerk. Without objection, Mr. Aron waived the reading of the posted agenda and instead directed the insertion thereof into these minutes. The posted agenda is re-created here.

AGENDA
NOTE: This agenda is tentative until 24 hours in advance of the meeting, at which time the most recent revision becomes official.
Revised 11-05-2016

A. Call to Order
B. Quorum Call
C. Call for Additional Agenda Items & Adoption of Agenda
* Statement of Purpose
D. Opportunity for Public Comment
E. Formal Hearings

01. PTC.022223 – Kenyeta Rashun Graham  Case No. 16-0043
02. CPT.010966 – Sarah Elizabeth Kiley  Case No. 16-0068
03. PTC.022001 – Debra Ann Mercadel  Case No. 16-0068
04. CPT.009222 – Scarlet Thompson Johnson  Case No. 16-0114
05. CPT.011219 – Brooke Nicole LaFleur  Case No. 16-0089

At the conclusion of the cases docketed above, the Board will recess; they will reconvene the following day at 8:30 a.m., in the Board office, to consider the following cases:

E. Formal Hearings (continued)

06. PHY.007110 – Northside Pharmacy, LLC d/b/a Global Pharmacy  Case No. 15-0327
E. Formal Hearings

Kenyeta Rashun Graham (PTC.022223) Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no witnesses, and five exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent’s professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered executive session at 3:20 p.m. and then reconvened in open session at 3:55 p.m.

Ms. Hall moved, 

Resolved, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Ms. Hall then moved, 

Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Ms. Hall then moved, 

Resolved, that the hearing panel enter the following order at this time: 

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Candidate Registration No. 22223, held by Kenyeta Rashun Graham, shall be and is hereby revoked, effective on the entry of this order, and further, the respondent shall pay the following assessments:  

(1) A fine of $1,000;  
(2) The administrative hearing fee of $250; and  
(3) The investigative and hearing costs, including the costs of the prosecuting attorney, and the official recorder; and

It is further ordered the acceptance of any future application
for the reinstatement of this registration, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

1. Respondent shall have paid all assessments levied herein; and
2. Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction.

Prior to the vote, Mr. McKay moved to amend the proposed order by striking the third condition for the reinstatement application, leaving only the first two conditions. The motion was adopted after a unanimous vote in the affirmative. Ms. Milano then moved to amend the proposed order by increasing the amount of the fine from $1,000 to $2,800. The motion failed on a vote of 5-7; Mr. Mannino, Ms. Milano, Mr. Pitre, Mr. Resweber, and Mr. Soileau voted for the motion. With no further discussion or amendments, the amended motion for the proposed order was adopted after a unanimous vote in the affirmative.

Sarah Elizabeth Kiley (CPT.010966) Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no witnesses, and five exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent’s professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered executive session at 4:10 p.m. and then reconvened in open session at 4:15 p.m.

Mr. McKay moved,

Resolved, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. McKay then moved,

Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. McKay then moved,

Resolved, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Certificate No. 10966, held by Sarah
Elizabeth Kiley, shall be and is hereby revoked, effective on the entry of this order, and further, the respondent shall pay the following assessments:

1. A fine of $1,000;
2. The administrative hearing fee of $250; and
3. The investigative and hearing costs, including the costs of the prosecuting attorney, and the official recorder; and

It is further ordered the acceptance of any future application for the reinstatement of this registration, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

1. Respondent shall have paid all assessments levied herein;
2. Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction; and
3. Respondent shall received a favorable recommendation for her return to the practice of pharmacy without posing a threat to the public’s health, safety, or welfare pursuant to a medical evaluation from an addiction medicine specialist approved by the Board.

The motion was adopted after a unanimous vote in the affirmative.

Debra Ann Mercadel (PTC.022001) Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no witnesses, and seven exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent’s professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered executive session at 4:25 p.m. and then reconvened in open session at 4:40 p.m.

Mr. Robichaux moved,

Resolved, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Robichaux then moved,

Resolved, that the Board’s hearing panel accept the Conclusions
of Law as proposed by the Prosecuting Attorney, adopt them as
our own, and then enter them into the hearing record.
The motion was adopted after a unanimous vote in the affirmative. Mr.
Robichaux then moved,

Resolved, that the hearing panel enter the following order at this
time:

It is ordered, adjudged, and decreed that Louisiana
Pharmacy Technician Candidate Registration No. 22001,
held by Debra Ann Mercadel, shall be and is hereby
revoked, effective on the entry of this order, and further, the
respondent shall pay the following assessments:
(1) A fine of $1,000;
(2) The administrative hearing fee of $250; and
(3) The investigative and hearing costs, including the
costs of the prosecuting attorney, and the official
recorder; and

It is further ordered the acceptance of any future application
for the reinstatement of this registration, or any application
for any other credential issued by the Board, shall be
conditioned upon the satisfaction of the following terms:
(1) Respondent shall have paid all assessments levied
herein; and
(2) Respondent shall have no pending legal or
disciplinary actions against her in any jurisdiction.

The motion was adopted after a majority vote in the affirmative; Mr. Mannino
objected.

Scarlet Thompson Johnson (CPT.009222) Mr. Finalet appeared for the Board
and noted the absence of the respondent or counsel. After verifying the absence
of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the
form of a default proceeding. Mr. Finalet presented an opening statement, no
witnesses, and five exhibits. He then offered a closing statement, proffered
proposed findings of fact, conclusions of law, and board order, and then
tendered the matter to the hearing panel for its consideration. Mr. Pitre moved to
enter into executive session for the purpose of deliberating the disciplinary
matter and discussing the respondent’s professional competency. The motion
was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered executive session at 4:50 p.m. and then
reconvened in open session at 5:00 p.m.

Mr. Indovina moved,

Resolved, that the Board’s hearing panel, having heard the
testimony and considered the evidence, accept the Findings of
Fact as proposed by the Prosecuting Attorney, adopt them as our
own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Indovina
then moved, **Resolved**, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Indovina then moved, **Resolved**, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Certificate No. 9222, held by Scarlet Thompson Johnson, shall be and is hereby revoked, effective on the entry of this order, and further, the respondent shall pay the following assessments:

1. A fine of $1,000;
2. The administrative hearing fee of $250; and
3. The investigative and hearing costs, including the costs of the prosecuting attorney, and the official recorder; and

It is further ordered the acceptance of any future application for the reinstatement of this certificate, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

1. Respondent shall have paid all assessments levied herein; and
2. Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction.

The motion was adopted after a unanimous vote in the affirmative.

**Brooke Nicole LaFleur (CPT.011219)** Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no witnesses, and five exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent’s professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered executive session at 5:10 p.m. and then reconvened in open session at 6:05 p.m.

Mr. Cassidy moved, **Resolved**, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, modify them by amending Item 3 to read “On or about March 29, 2016, the Board
office received notification from Pharmacist Barry Kent Laningham regarding Respondent.", adopt the amended findings as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Cassidy then moved,

Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a majority vote in the affirmative; Mr. Mannino objected. Mr. Cassidy then moved,

Resolved, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Certificate No. 11219, held by Brooke Nicole LaFleur, shall be and is hereby suspended for an indefinite period of time, effective on the entry of this order, and further, the respondent shall pay the following assessment:

(1) The administrative hearing fee of $250; and

It is further ordered the acceptance of any future application for the reinstatement of this certificate, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

(1) Respondent shall have paid all assessments levied herein; and

(2) Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction.

The motion was adopted after a unanimous vote in the affirmative.

Mr. Finalet indicated completion of the cases scheduled for that day. Mr. Aron expressed his appreciation to Mr. LaCour for his recording services that day.

Having completed the tasks itemized on the posted agenda, with no further business pending before the Board, and without objection, Mr. Aron recessed the meeting at 6:10 p.m.

* * * * *

The Administrative Hearing was re-convened on Thursday, November 17, 2016 in the Boardroom of the Board’s office, located at 3388 Brentwood Drive in Baton Rouge, Louisiana. The hearing was held pursuant to public notice, each member received notice, each respondent received notice (unless specifically stated otherwise in the official transcript), and notice was properly posted.
A. Call to Order
Mr. Aron called the meeting to order at 8:30 a.m.

B. Invocation & Pledge of Allegiance
Mr. Aron called upon Mr. Bond, and he delivered the invocation. Ms. Melancon then led the members in reciting the Pledge of Allegiance.

C. Quorum Call
Mr. Aron called upon the Secretary, Mr. Bond, to call the roll to establish a quorum. Mr. Bond certified that Mr. Moore and Mr. Soileau were absent, but that the other 15 members were present, constituting a quorum for the conduct of Board business.

* Statement of Purpose
Mr. Aron reminded the members of the purpose and mission of the Board of Pharmacy by reciting the relevant portion of the Louisiana Pharmacy Practice Act. He urged the members to keep their mission in mind as they considered all the matters before them.

D. Opportunity for Public Comment
Mr. Aron reminded the members and guests the Open Meetings Law requires all public bodies to provide an opportunity for public comment at all meetings and prior to the vote on each agenda item. He solicited comments from the guests, but none were offered.

* Appearances
Mr. Aron indicated he would serve as the Hearing Officer, Ms. Celia R. Cangelosi and Mr. Carlos Finalet as the Prosecuting Attorneys, Ms Trisha Gregory as the Official Recorder, and Mr. Malcolm Broussard as the Hearing Clerk.

E. Formal Hearings (continued)

Northside Pharmacy, LLC d/b/a Global Pharmacy [Haleyville, AL] (PHY.007110) Ms. Cangelosi appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Ms. Cangelosi presented an opening statement, one witness, and eight exhibits. She then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent's professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered into executive session at 8:50 a.m. and then reconvened in open session at 9:15 a.m.

Ms. Hall moved,

Resolved, that the Board's hearing panel, having heard the
testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, modify them by amending Item 9 to read, in part, “will no longer be doing business” as well as Items 15 and 16 to reflect the absence of the respondent from these proceedings, to adopt the amended findings as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Ms. Hall then moved, 

Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Ms. Hall then moved,

Resolved, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Permit No. 7110, held by Northside Pharmacy, LLC d/b/a Global Pharmacy, shall be and is hereby revoked, effective on the entry of this order, and further, the respondent shall pay the following assessments:

1. A fine of $5,000;
2. The administrative hearing fee of $250; and
3. The investigative and hearing costs, including the costs of the prosecuting attorney and the official recorder; and

It is further ordered the acceptance of any future application for the reinstatement of this permit, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

1. Respondent shall have paid all assessments levied herein; and
2. Respondent shall have no pending legal or disciplinary actions against them in any jurisdiction.

The motion was adopted after a unanimous vote in the affirmative.

Ms. Cangelosi indicated the completion of the case and that Mr. Finalet was scheduled to prosecute the remaining cases that day. Mr. Aron expressed his appreciation to Ms. Cangelosi for her prosecutorial services that day.

Dicie Elizabeth Fulks (CPT.009540) Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no witnesses, and six exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. McKay moved to enter into executive session for the purpose of deliberating the disciplinary
matter and discussing the respondent’s professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered into executive session at 9:30 a.m. and then reconvened in open session at 9:45 a.m.

Mr. Indovina moved,  
Resolved, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, modify them by amending Item 3 to remove the duplicated words “since her last”, to adopt the amended findings as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Indovina then moved,  
Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. Indovina then moved,  
Resolved, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Certificate No. 9540, held by Dicie Elizabeth Fulks, shall be and is hereby suspended for an indefinite period of time, effective on the entry of this order, and further, the respondent shall pay the following assessment:

(1) A fine of $250;
(2) The administrative hearing fee of $250; and
(3) The investigative and hearing costs, including the costs of the prosecuting attorney and the official recorder; and

It is further ordered the acceptance of any future application for the reinstatement of this certificate, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

(1) Respondent shall have paid all assessments levied herein; and
(2) Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction.

The motion was adopted after a unanimous vote in the affirmative.

Natalie Nicole Marshall (CPT.011282) Mr. Finalet appeared for the Board and noted the absence of the respondent or counsel. After verifying the absence of the respondent, Mr. Aron ruled the hearing would proceed as scheduled in the form of a default proceeding. Mr. Finalet presented an opening statement, no
witnesses, and five exhibits. He then offered a closing statement, proffered proposed findings of fact, conclusions of law, and board order, and then tendered the matter to the hearing panel for its consideration. Mr. Cassidy moved to enter into executive session for the purpose of deliberating the disciplinary matter and discussing the respondent's professional competency. The motion was adopted after a unanimous roll call vote in the affirmative.

It was noted the hearing panel entered into executive session at 9:55 a.m. and then reconvened in open session at 10:15 a.m.

Mr. McKay moved,

Resolved, that the Board’s hearing panel, having heard the testimony and considered the evidence, accept the Findings of Fact as proposed by the Prosecuting Attorney, modify them by amending Item 3 to remove the duplicated words "since her last", to adopt the amended findings as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. McKay then moved,

Resolved, that the Board’s hearing panel accept the Conclusions of Law as proposed by the Prosecuting Attorney, adopt them as our own, and then enter them into the hearing record.

The motion was adopted after a unanimous vote in the affirmative. Mr. McKay then moved,

Resolved, that the hearing panel enter the following order at this time:

It is ordered, adjudged, and decreed that Louisiana Pharmacy Technician Certificate No. 11282, held by Natalie Nicole Marshall, shall be and is hereby suspended for an indefinite period of time, effective on the entry of this order, and further, the respondent shall pay the following assessment:

(1) A fine of $250;
(2) The administrative hearing fee of $250; and
(3) The investigative and hearing costs, including the costs of the prosecuting attorney and the official recorder; and

It is further ordered the acceptance of any future application for the reinstatement of this certificate, or any application for any other credential issued by the Board, shall be conditioned upon the satisfaction of the following terms:

(1) Respondent shall have paid all assessments levied herein; and
(2) Respondent shall have no pending legal or disciplinary actions against her in any jurisdiction.

The motion was adopted after a unanimous vote in the affirmative.
Mr. Finalet indicated completion of the cases scheduled for that day. Mr. Aron expressed his appreciation to Ms. Gregory for her recording services that day.

F. Adjourn
Having completed the tasks itemized on the posted agenda, with no further business pending before the Board, and without objection, Mr. Aron adjourned the meeting at 10:20 a.m.

Respectfully submitted,

________________________________________________________________________
Brian A. Bond
Secretary
Louisiana Board of Pharmacy
3388 Brentwood Drive
Baton Rouge, Louisiana 70809-1700
Telephone 225.925.6496 ~ Facsimile 225.925.6499
www.pharmacy.la.gov ~ E-mail: info@pharmacy.la.gov

Report on Action Items
January 25, 2017

Agenda Item 6: Report on Action Items

During your August 10, 2016 Board meeting, you acted on two regulatory projects. In particular:

- You reviewed the comments and testimony from the May 25, 2016 public hearing relative to Regulatory Project 2016-2 ~ Pharmacist-in-Charge at Nonresident Pharmacies. You directed staff to respond appropriately to the single commentator, make no changes to the original proposal, then submit the required second report to the Joint Legislative Oversight Committee on Health & Welfare. We responded to the commentator on November 13, 2016, and the following day, we submitted the required Second Report to the Joint Legislative Oversight Committee on Health & Welfare. We also distributed an electronic Notice of Rulemaking Activity that same day. With no intervention by the legislature, we submitted the final notice to the state register. The Final Rule was published in the January 20, 2017 edition of the Louisiana Register, effective that same day.

- You approved Regulatory Proposal 2016-A ~ Marijuana Pharmacy. We prepared the required impact statements and negotiated those to the satisfaction of the Legislative Fiscal Office. On January 9, 2017, we submitted the Notice of Intent to the Joint Legislative Oversight Committee on Health & Welfare and to the state register. We distributed an electronic Notice of Rulemaking Activity the next day. The Notice of Intent was published in the January 20, 2017 edition of the Louisiana Register, and as advertised in the notice, we will conduct a public hearing on March 2 to receive comments and testimony on the proposed new rule.

During your November 16, 2016 Board meeting, you approved several initiatives. In particular:

- During the report from the Finance Committee, you adopted a budget for Fiscal Year 2017-2018. On December 12, 2016, we reported the state-formatted version of your budget to the Legislative Auditor, the Legislative Fiscal Office, the Joint Legislative Committee on the Budget, as well as the Senate & House Committees on Health and Welfare.

- During the report from the Reinstatement Committee, you approved a regulatory proposal to streamline the current process for the reinstatement of CDS licenses for certain practitioners whose primary professional licenses have been disciplined. We prepared the required impact statements and negotiated those to the satisfaction of the Legislative Fiscal Office. On January 9, 2017, we submitted the Notice of Intent to the Joint Legislative Oversight Committee on Health & Welfare and to the state register. We distributed an electronic Notice of Rulemaking Activity the following day. The Notice of Intent was published in the January 20, 2017 edition of the Louisiana Register, and as advertised in the notice, we will conduct a public hearing on March 1 to receive comments and testimony on the proposed rule change.

- During the report from the Executive Committee, you approved several initiatives. In particular:
  - You approved a proposal to delay the pending changes to the rules for pharmacy technicians for another year, until January 1, 2018. You then revised the original Emergency Rule which changed the current 2016 date to 2017, and then set the effective date of the revised Emergency Rule as November 17, 2016. It is scheduled to expire on March 17 unless renewed sooner. On that day, we filed the required notice for Emergency Rules with the Offices of the Governor and Attorney General, as well as the President of the Senate, the Speaker of the House of Representatives, and the Chairs of the Senate and House Committees on Health & Welfare. We distributed an electronic Notice of Rulemaking Activity the following day. With respect to the regulatory project, we prepared the required impact statements and negotiated those to the satisfaction of the Legislative Fiscal Office. On January 9, 2017, we submitted the Notice of Intent to the Joint Legislative Oversight Committee on Health & Welfare and to the state register.
distributed an electronic Notice of Rulemaking Activity the following day. The Notice of Intent was published in the January 20, 2017 edition of the *Louisiana Register*, and as advertised in the notice, we will conduct a public hearing on March 1 to receive comments and testimony on the proposed rule changes.

- You approved a request to re-issue the original Emergency Rule for *Regulatory Project 2016-4 ~ Standing Orders for Distribution of Naloxone*. The original Emergency Rule was issued on August 10, 2016 and was scheduled to expire on December 8, 2016. We re-issued the Emergency Rule on December 7, 2016 by filing the required notice for Emergency Rules with the Offices of the Governor and Attorney General, as well as the President of the Senate, the Speaker of the House of Representatives, and the Chairs of the Senate and House Committees on Health & Welfare. We distributed an electronic Notice of Rulemaking Activity the same day. The current Emergency Rule is scheduled to expire on April 6 unless renewed sooner. With respect to the regulatory project, we prepared the required impact statements and negotiated those to the satisfaction of the Legislative Fiscal Office. On January 9, 2017, we submitted the Notice of Intent to the Joint Legislative Oversight Committee on Health & Welfare and to the state register. We distributed an electronic Notice of Rulemaking Activity the next day. The Notice of Intent was published in the January 20, 2017 edition of the *Louisiana Register*, and as advertised in the notice, we will conduct a public hearing on March 1 to receive comments and testimony on the proposed new rule.

- You approved a Declaration of Emergency with respect to the proposed rule recommended by the Reinstatement Committee – *Reinstatement of CDS Licenses*. You set the effective date of the Emergency Rule as November 17, 2016. It is scheduled to expire on March 17 unless renewed sooner. On November 17, 2016, we filed the required notice for Emergency Rules with the Offices of the Governor and Attorney General, as well as the President of the Senate, the Speaker of the House of Representatives, and the Chairs of the Senate and House Committees on Health & Welfare. We distributed an electronic Notice of Rulemaking Activity the following day.

- During the report from the Executive Director, you approved the *Annual Report for Fiscal Year 2015-2016* and directed its required distribution. We transmitted a copy of the report to the Office of the Governor on November 18, 2016 and then posted it on the Board’s website.

Respectfully submitted,
Malcolm J Broussard
Executive Director
Special Order of the Day

Office of the Legislative Auditor
Legislative Subpoena for Copy of PMP Database

NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
Part X-A. Prescription Monitoring Program

[Editor’s Note: The Prescription Monitoring Program was created by Act 676 of 2006 Legislature. Subsequent amendments are noted herein.]

§1001. Short title

This Section shall be known and may be cited as the “Prescription Monitoring Program Act.”

§1002. Purpose

The purpose of this Part is to authorize the development, implementation, operation, and evaluation of an electronic system for the monitoring of controlled substances and other drugs of concern that are dispensed in the state or dispensed to an address within the state. The goal of the program is to improve the state’s ability to identify and inhibit the diversion of controlled substances and drugs in an efficient and cost-effective manner and in a manner that shall not impede the appropriate utilization of these drugs for legitimate medical purposes.

§1003. Definitions

As used in this Part, the following terms shall have the meaning ascribed to them unless the context clearly indicates otherwise:

1. “Administer” or “administration” means the direct application of a drug to the body of a patient by injection, inhalation, ingestion, or any other means.
3. “Board” means the Louisiana Board of Pharmacy.
4. “Controlled substance” means any substance or drug defined, enumerated, or included in federal or state statute or rules, 21 CFR 1308.11-15 or R.S. 40:964, or any substance which may hereafter be designated as a controlled substance by amendment or supplementation of such regulations or statute. “Controlled substance” shall not include distilled spirits, wine, malt beverages, or tobacco.
5. “Dispense” or “dispensing” means the interpretation, evaluation, and implementation of a prescription drug order, including the preparation and delivery of a drug or device to a patient or patient’s agent in a suitable container appropriately labeled for subsequent administration to, or use by, a patient.
6. “Dispenser” means a person authorized by this state to dispense or distribute to the ultimate user any controlled substance or drug monitored by the program, but shall not include any of the following:
   (a) A pharmacy permitted by the board as a hospital pharmacy that dispenses or distributes any controlled substance or drug monitored by the program for the purposes of inpatient health care.
   (b) A practitioner who dispenses or distributes no more than a single forty-eight hour supply of such controlled substance or drug to a patient prior to, or subsequent to, performing an actual procedure on that patient.
   (c) A practitioner or other authorized person who administers such controlled substance or drug upon the lawful order of a practitioner.
   (d) A wholesale distributor of such controlled substance or drug that is credentialed by the Louisiana State Board of Wholesale Drug Distributors.
   (e) (Added by Act 144 of 2010 Legislature; repealed by Act 27 of 2013 Legislature).
7. “Distribute” or “distribution” means the delivery of a drug or device other than by administering or dispensing.
8. “Drug” means any of the following:
   (a) Any substance recognized as a drug in the official compendium, or supplement thereto, designated by the board for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans or animals.
   (b) Any substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans or other animals.
   (c) Any substance other than food intended to affect the structure or any function of the body of humans or other animals.
9. “Drugs of concern” means drugs other than controlled substances as defined by rule which demonstrate a potential for abuse.
10. “Patient” means the person or animal who is the ultimate user of a controlled substance or drug monitored by the program for whom a prescription is issued and for whom a controlled substance or drug is dispensed.
11. “Prescriber” means a licensed health care professional with prescriptive authority.

August 2016
“Prescription monitoring information” means data submitted to and maintained by the prescription monitoring program.

“Prescription Monitoring Program” or “PMP” means the program established in R.S. 40:1004.

“Procedure” means any dental or medical practice or process described in the current year’s version of the American Dental Association’s *Current Dental Terminology* or the American Medical Association’s *Code of Procedural Terminology*.

§1004. Establishment of prescription monitoring program

A. The board shall establish and maintain, in consultation with and upon the recommendation of the advisory council, an electronic system for the monitoring of controlled substances and drugs of concern dispensed in the state or dispensed to an address in the state.

B. In conformity with the Louisiana Public Bid Law, R.S. 38:2211 et seq., the board may contract with a vendor to establish and maintain the electronic monitoring system pursuant to rules promulgated by the board.

C. This Part shall not apply to any person licensed pursuant to R.S. 37:1511 et seq.

(Added by Act 27 of 2013 Legislature, effective May 23, 2013)

§1005. Advisory council

A. The advisory council shall consist of the following members, each of whom may appoint a designee:

1. The president of the Louisiana State Board of Medical Examiners.
2. The president of the Louisiana State Board of Dentistry.
3. The president of the Louisiana State Board of Nursing.
4. The president of the Louisiana State Board of Optometry Examiners.
5. (Added by Act 144 of 2010 Legislature, repealed by Act 27 of 2013 Legislature).
6. The president of the Louisiana Academy of Physicians Assistants.
7. The president of the Louisiana Board of Pharmacy.
8. The superintendent of the Louisiana State Police.
10. The speaker of the Louisiana House of Representatives.
11. The president of the Louisiana Senate.
12. The chairman of the House Committee on Health and Welfare.
13. The chairman of the Senate Committee on Health and Welfare.
14. The secretary of the Department of Health and Hospitals.
15. The president of the Louisiana State Medical Society.
17. The president of the Louisiana Association of Nurse Practitioners.
18. The president of the Optometry Association of Louisiana.
21. The president of the National Association of Chain Drug Stores.
22. The president of the Louisiana Sheriffs’ Association.
23. The president of the Louisiana District Attorneys Association.
24. The president of the Pharmaceutical Research and Manufacturers of America.
25. The president of the Louisiana Academy of Medical Psychologists.

B. The members of the advisory council shall serve at the pleasure of their respective appointing authorities, eleven of whom shall constitute a quorum for the transaction of all business. The members shall elect a chairman and vice chairman whose duties shall be established by the advisory council. The board shall fix a time and place for regular meetings of the advisory council, which shall meet at least quarterly. The advisory council shall establish policies and procedures necessary to carry out its duties.

C. The board shall seek, and the advisory council shall provide, information and advice regarding the development and operation of the electronic monitoring system, including but not limited to the following:

1. Which controlled substances should be monitored.
2. Which drugs of concerns demonstrate a potential for abuse and should be monitored.
3. Design and implementation of educational courses identified in R.S. 40:1008.
4. The methodology to be used for analysis and interpretation of prescription monitoring information.
5. Design and implementation of a program evaluation component.
6. Identification of potential additional members to the advisory council.

(Added by Act 27 of 2013 Legislature, effective May 23, 2013)
§1006. Reporting of prescription monitoring information  
A. Each dispenser shall submit to the board information regarding each prescription dispensed for a controlled substance or drug monitored by the program. The information submitted for each prescription shall include, at a minimum, data relative to the identification of the following elements of the transaction:  
   (1) Prescriber information.  
   (2) Patient information.  
   (3) Prescription information.  
   (4) Controlled substance or drug information.  
   (5) Dispenser information.  
B. Each dispenser shall submit the required information in accordance with transmission methods and frequency established by the board. Each eligible prescription transaction shall be reported no later than the next business day after the date of dispensing.  
(Amended by Act 488 of 2010 Legislature, effective June 22, 2010; Act 472 of 2014 Legislature, effective August 1, 2014.)  
C. The board may issue a waiver to a dispenser who is unable to submit prescription information by electronic means. The waiver shall state the format and frequency with which the dispenser shall submit the required information. The board may issue an exemption from the reporting requirement to a dispenser whose practice activities are inconsistent with the intent of the program. The board may rescind any previously issued exemption without the need for an informal or formal hearing.  
(Amended by Act 129 of 2009 Legislature.)  
D. Any person or entity required to report information concerning prescriptions to the board or to its designated agent pursuant to the requirements of this Part shall not be liable to any person or entity for any claim of damages as a result of the act of reporting the information and no lawsuit may be predicated thereon. Any person or entity who submits report information in good faith containing prescription information that is not the subject of the PMP shall not be liable to any person or entity for any claim of damages and no lawsuit may be predicated thereon.  
E. The Prescription Monitoring Program’s agents, a dispenser, or a prescriber may report suspected violations of this Section or violations of any law to any local, state, out-of-state, or federal law enforcement agency, or the appropriate prosecutorial agency for further investigation or prosecution.  
(Amended by Act 488 of 2010 Legislature, effective June 22, 2010.)  
F. No agent, dispenser, or prescriber who in good faith reports suspected violations as provided for in Subsection E of this Section shall be liable to any person or entity for any claim of damages as a result of the act of reporting the information, and no lawsuit may be predicated thereon.  
(Subsections E and F added by Act 314 of 2009 Legislature)  
G. The board shall establish by rulemaking standards for the retention, archiving, and destruction of prescription monitoring information.  
(Added by Act 189 of 2016 Legislature, effective August 1, 2016)  

§1007. Access to prescription monitoring information  
A. Except as provided in Subsections C, D, E, F, G, H, and I of this Section, prescription monitoring information submitted to the board shall be protected health information, not subject to public or open records law, including but not limited to R.S. 44:1 et seq., and not subject to disclosure. Prescription monitoring information shall not be available for civil subpoena from the board nor shall such information be disclosed, discoverable, or compelled to be produced in any civil proceeding nor shall such records be deemed admissible as evidence in any civil proceeding for any reason. Notwithstanding this provision, law enforcement and professional licensing, certification, and regulatory agencies may utilize prescription monitoring information in the course of any investigation and subsequent criminal and administrative proceedings, but only in accordance with federal and state law and the requirements of this Part.  
(Amended by Act 352 of 2012 Legislature, effective August 1, 2012; amended by Act 22 of 2015 Legislature, effective August 1, 2015)  
B. The board shall maintain procedures to ensure that the privacy and confidentiality of patients and patient information collected, recorded, transmitted, and maintained is not disclosed to persons or entities except as in Subsections C, D, E, F, G, H, and I of this Section.  
(Amended by Act 352 of 2012 Legislature, effective August 1, 2012)  
C. The board shall review the prescription monitoring information. If there is reasonable suspicion to believe a breach of professional or occupational standards may have occurred, the board shall notify the
appropriate professional licensing agency with jurisdiction over prescribers or dispensers and shall provide prescription monitoring information required for an investigation.

D. The board shall provide prescription monitoring information to public or private entities, whether located in or outside of the state, for public research, policy, or educational purposes, but only after removing information that identifies or could be reasonably be used to identify prescribers, dispensers, and individual patients or persons who received prescriptions from prescribers.

(Earned by Act 488 of 2010 Legislature, effective June 22, 2010.)

E. The following persons, after successful completion of the educational courses identified in R.S. 40:1008, may access prescription monitoring information at no cost and in the same or similar manner, and for the same or similar purposes, as those persons are authorized to access similar protected health information under federal and state law and regulation:

(1) Persons authorized to prescribe or dispense controlled substances or drugs of concern, or their delegates as defined by rule, for the purpose of providing medical or pharmaceutical care for their patients, or for verifying their prescriptions records.

(Amended by Act 488 of 2010 Legislature, effective June 22, 2010; further amended by Act 110 of 2013 Legislature, effective August 1, 2013.)

(2) Designated representatives from the professional licensing, certification, or regulatory agencies of this state or another state charged with administrative oversight of those professionals engaged in the prescribing or dispensing of controlled substances or other drugs of concern.

(Amended by Act 488 of 2010 Legislature, effective June 22, 2010.)

(3) Designated representatives from the Louisiana Medicaid program regarding Medicaid program recipients.

(4) Designated representatives of the board and any vendor or contractor establishing or maintaining the prescription monitoring program.

F. The board may provide a report containing prescription monitoring information upon application of local, state, out-of-state, and federal law enforcement or prosecutorial officials engaged in the administration, investigation, or enforcement of the laws governing controlled substances or other drugs of concern in compliance with and as limited by the relevant requirements of any of the following:

(1) A court order or court-ordered warrant, or a subpoena or summons issued by a judicial officer.

(2) A grand jury subpoena.

(3) An administrative request, including an administrative subpoena or summons, a civil or an authorized investigative demand, or similar process authorized under law, provided by law enforcement to the board, and further, provided all of the following:

   (a) The information sought is relevant and material to a legitimate law enforcement inquiry.

   (b) The request is specific and limited in scope to the extent reasonably practicable in light of the purpose for which the information is sought.

   (c) De-identified information, or limited information that does not identify or could not reasonably lead to the identification of an individual patient, could not reasonably be used.

(Amended by Act 488 of 2010 Legislature, effective June 22, 2010.)

G. The board may provide prescription monitoring information in response to queries from prescription monitoring programs located in other states, through its participation in a secure interstate data exchange system, and the information may be used by those programs in a manner consistent with this Section.

(Added by Act 352 of 2012 Legislature, effective August 1, 2012; amended by Act 22 of 2015 Legislature, effective August 1, 2015)

H. The board may provide prescription monitoring information to authorized users of the prescription monitoring program via a state health information exchange or other third party conduit that has been approved by the board.

(Added by Act 352 of 2012 Legislature, effective August 1, 2012)

I. The board may provide prescription monitoring information to an individual who requests his personal prescription monitoring information in accordance with procedures established by board regulation.

J. The board and advisory council shall be immune from civil liability arising from inaccuracy of any of the information submitted to the board pursuant to this Part.

§1008. Education and treatment

A. The board shall, in consultation with and upon recommendation of the advisory council, implement the following education courses:

(1) An orientation course during the implementation phase of the prescription monitoring program.
A course for persons who are authorized to access the prescription monitoring information, but who did not participate in the orientation course.

A course for persons who are authorized to access the prescription monitoring information, but who have violated the laws or breached occupational standards involving the prescribing, dispensing, or use of any controlled substances or drugs monitored by the prescription monitoring program.

A continuing education course for health care providers or professionals on prescribing practices, pharmacology, and the identification, treatment, and referral of a patient addicted to or abusing controlled substances or drugs monitored by the prescription monitoring program.

§1009. Unlawful acts and penalties
A. A dispenser who fails to submit prescription monitoring information to the board as required by this Part shall be referred to the appropriate professional licensing, certification, or regulatory agency for administrative sanctions as deemed appropriate by that agency.

B. A person or entity authorized to possess prescription monitoring information pursuant to this Part who knowingly discloses such information in violation of this Part shall be referred to the appropriate professional licensing, certification, or regulatory agency for administrative sanctions as deemed appropriate by that agency and may, upon criminal conviction, be imprisoned, with or without hard labor, for not more than five years, and in addition, may be fined not more than five thousand dollars.

C. A person or entity authorized to possess prescription monitoring information pursuant to this Part who uses such information in a manner or for a purpose in violation of this Part shall be referred to the appropriate professional licensing, certification, or regulatory agency for administrative sanctions as deemed appropriate by that agency and may, upon criminal conviction, be imprisoned, with or without hard labor, for not more than five years, and in addition, may be fined not more than five thousand dollars.

§1010. Evaluation; data analysis; reporting
A. The board shall, in consultation with and upon recommendation of the advisory council, design and implement an evaluation component to identify cost benefits of the prescription monitoring program and other information relevant to policy, research, and education involving controlled substances and drugs monitored by the prescription monitoring program.

B. The board shall report to the appropriate legislative oversight committees on a periodic basis, but in no case less than annually, the cost benefits and other information contained in Subsection A of this Section.

§1011. Rules and regulations
In accordance with the Administrative Procedure Act, R.S. 49:950 et seq., the board shall promulgate rules and regulations necessary to implement the provisions of this Part.

§1012. Authority to contract
In accordance with the Public Bid Law, R.S. 38:2211 et seq., the board shall have the authority to contract with another agency of this state or with a private vendor, as necessary, to ensure the effective operation of the prescription monitoring program. Any contractor shall be bound to comply with provisions regarding confidentiality of prescription information in R.S. 40:1007, and further, shall be subject to the penalties specified in R.S. 40:1009 for unlawful acts.

§1013. Funding authority
A. The board shall have the authority to make application for, receive, and administer grant funding from public or private sources for the development, implementation, or enhancement of the prescription monitoring program.

B. In the event the legislature provides full funding for the prescription monitoring program, no fees shall be levied as provided in this Section.

C. The board shall have the authority to levy and collect an annual fee from each of the following practitioners in possession of authority to prescribe or dispense controlled dangerous substances: physicians, podiatrists, dentists, optometrists, advanced practice registered nurses, physician assistants,
medical psychologists, or any other person subsequently authorized by law to prescribe controlled
dangerous substances. The board shall also have the authority to levy and collect an annual fee from each
pharmacy licensed by the board. The annual fee levied and collected from each person enumerated in this
Subsection and each pharmacy shall not exceed twenty-five dollars.
(Amended by Act 144 of 2010 Legislature; further amended by Act 27 of 2013 Legislature, effective May
23, 2013)
D. The board shall not be required to fund any aspect of the prescription monitoring program.

§1014. Severability

If any provision of this Act or application thereof to any person or circumstance is held invalid, the invalidity
does not affect other provisions or applications of this Act which can be given effect without the invalid provisions or
applications, and to this end the provisions of this Act are severable.
Finance Committee

NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
Finance Committee

Interim Report
Fiscal Year 2016-2017

January 25, 2017

Blake P. Pitre
Chair
## ASSETS

### Current Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>FY 15-16</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General Operations</td>
<td></td>
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</tr>
<tr>
<td>Whitney Bank</td>
<td>160,674</td>
<td>160,756</td>
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<tr>
<td>Iberia Bank</td>
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<td>1,578,012</td>
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<tr>
<td>Hurricane Relief Fund - Whitney Bank</td>
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<td>Reserve Funds</td>
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<tr>
<td>General Account</td>
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<tr>
<td>OPEB Account</td>
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<tr>
<td>Pension Account</td>
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<td>Total Cash</td>
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### Prepaid Expenses

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<thead>
<tr>
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<tr>
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### Accounts Receivable

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**Total Current Assets**

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<tr>
<td></td>
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### Fixed Assets

<table>
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<tr>
<th>Description</th>
<th>FY 15-16</th>
<th>FY 16-17</th>
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</thead>
<tbody>
<tr>
<td>Land: Lot 5-A, Towne Center Business Park</td>
<td>709,080</td>
<td>709,080</td>
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<tr>
<td>Office Building - 3388 Brentwood Drive</td>
<td>1,057,861</td>
<td>1,057,861</td>
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<td>Office Equipment</td>
<td>222,949</td>
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<td>Furniture</td>
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<td>156,785</td>
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<td>Software: Licensure &amp; Website</td>
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<td>408,560</td>
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<td>Accumulated Depreciation</td>
<td>(826,997)</td>
<td>(858,037)</td>
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<tr>
<td><strong>Total Fixed Assets</strong></td>
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<td>1,994,457</td>
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</table>

**TOTAL ASSETS**

<table>
<thead>
<tr>
<th>Description</th>
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<th>FY 16-17</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>6,632,110</td>
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## DEFERRED OUTFLOWS OF RESOURCES

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**TOTAL ASSETS & DEFERRED OUTFLOWS**

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<thead>
<tr>
<th>Description</th>
<th>FY 15-16</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>7,231,092</td>
<td>7,692,638</td>
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## LIABILITIES

### Current Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>FY 15-16</th>
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</thead>
<tbody>
<tr>
<td>Accrued salaries and benefits</td>
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<td>Unemployment taxes payable</td>
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<td>State taxes withheld</td>
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<td>State retirement withheld</td>
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<td>Accounts payable</td>
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<td>Compensated absences (ST)</td>
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<td>PES fee payable</td>
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<td><strong>Total Current Liabilities</strong></td>
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<td></td>
<td>FY 15-16 Q4 06/30/2016</td>
<td>FY 16-17 Q2 12/31/2016</td>
</tr>
<tr>
<td>------------------------</td>
<td>------------------------</td>
<td>------------------------</td>
</tr>
<tr>
<td><strong>LIABILITIES (cont.)</strong></td>
<td></td>
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<tr>
<td>&gt; Long Term Liabilities</td>
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<tr>
<td>Compensated absences (LT)</td>
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<td>76,420</td>
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<td>Other Post Employment Benefits (OPEB) Payable</td>
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<td>1,172,029</td>
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<td>Net Pension Liability</td>
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<td>4,545,653</td>
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<td><strong>Total Long Term Liabilities</strong></td>
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<td>5,794,102</td>
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<td><strong>TOTAL LIABILITIES</strong></td>
<td>5,875,254</td>
<td>5,958,904</td>
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<td><strong>DEFERRED INFLOWS OF RESOURCES</strong></td>
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<tr>
<td></td>
<td>61,980</td>
<td>61,980</td>
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<td><strong>EQUITY</strong></td>
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<tr>
<td>Fund Balance at End of Prior Fiscal Year</td>
<td>(1,844,591)</td>
<td>(884,889)</td>
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<td>Fund Balance - designated</td>
<td>184,290</td>
<td>184,290</td>
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<td>Invested in Fixed Assets</td>
<td>2,024,098</td>
<td>1,994,457</td>
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<tr>
<td>Net Income/Loss</td>
<td>930,061</td>
<td>377,896</td>
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<td><strong>TOTAL EQUITY</strong></td>
<td>1,293,858</td>
<td>1,671,754</td>
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<tr>
<td><strong>TOTAL LIABILITIES, DEFERRED INFLOWS, &amp; EQUITY</strong></td>
<td>7,231,092</td>
<td>7,692,638</td>
</tr>
</tbody>
</table>
### Louisiana Board of Pharmacy

**FY 2016-2017**

**Statement of Revenue, Expenses, and Budget Performance**

<table>
<thead>
<tr>
<th></th>
<th>FY 15-16 Q4 06/30/2016</th>
<th>FY 16-17 Q2 12/31/2016</th>
<th>FY 16-17 Budget (A#1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Licenses &amp; Permits</strong></td>
<td></td>
<td></td>
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<tr>
<td>Pharmacist Renewals</td>
<td>811,750</td>
<td>762,700</td>
<td>815,000</td>
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<td>New Pharmacist Licensing Fee</td>
<td>183,600</td>
<td>55,800</td>
<td>185,000</td>
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<td>Technician Renewals</td>
<td>334,150</td>
<td>10,350</td>
<td>335,000</td>
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<tr>
<td>Technician Candidate Registrations</td>
<td>36,000</td>
<td>22,775</td>
<td>35,000</td>
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<td>Lapsed Credential Fees</td>
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<td>9,400</td>
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<td>Student Registrations</td>
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<td>2,140</td>
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<td>Permits - Pharmacies</td>
<td>301,175</td>
<td>260,625</td>
<td>300,000</td>
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<td>Permits - CDS</td>
<td>466,580</td>
<td>196,385</td>
<td>465,000</td>
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<td>Permits - Emergency Drug Kits</td>
<td>11,875</td>
<td>1,175</td>
<td>12,000</td>
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<tr>
<td>Permits - Automated Medication Systems</td>
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<td>1,650</td>
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<td>Permits - Durable Medical Equipment</td>
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<td><strong>Examinations</strong></td>
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<td>Reciprocity</td>
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<td>Technicians</td>
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<td>60,000</td>
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<tr>
<td><strong>Penalties</strong></td>
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<tr>
<td>Licenses and Certificates</td>
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<td>1,500</td>
<td>9,000</td>
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<td>Permits</td>
<td>11,815</td>
<td>9,015</td>
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<td><strong>Administrative Fees</strong></td>
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<td>Documents: Copies and Certification Fees</td>
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<td>Duplicate Credentials</td>
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<td>NSF Fees</td>
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<td>Handling &amp; Mailing Fees</td>
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<td>200</td>
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<tr>
<td><strong>Sale of Goods &amp; Services</strong></td>
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<td>Law Books</td>
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<td>Official Lists of Licensees</td>
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<td>USCPSC Inspection Fee</td>
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<td><strong>Enforcement Actions</strong></td>
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<td>Hearing Fees</td>
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<td>Fines</td>
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<td>Investigative Costs</td>
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<td><strong>Prescription Monitoring Program</strong></td>
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<td>512,000</td>
<td>217,075</td>
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<td><strong>TOTAL REVENUE</strong></td>
<td>3,473,372</td>
<td>1,809,515</td>
<td>3,309,500</td>
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</tbody>
</table>
### Louisiana Board of Pharmacy
**FY 2016-2017**

#### Statement of Revenue, Expenses, and Budget Performance

**Expenses**

<table>
<thead>
<tr>
<th></th>
<th>FY 15-16 Q4 06/30/2016</th>
<th>FY 16-17 Q2 12/31/2016</th>
<th>FY 16-17 Budget (A#1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Operations</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rentals - Office &amp; Equipment</td>
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<td>6,273</td>
<td>17,000</td>
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<td>Equipment Maintenance</td>
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<td>Telephone</td>
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<td>Postage</td>
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<td>Office Insurance (ORM)</td>
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<td>Office Insurance (ORM)</td>
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<tr>
<td>Dues &amp; Subscriptions</td>
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<td>Depreciation of Fixed Assets</td>
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<td>Interest Payments on Building Loan</td>
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<tr>
<td><strong>Acquisitions</strong></td>
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<td>Salaries</td>
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<td>Health Insurance (SEGBP)</td>
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<td>Other Post Employment Benefits (OPEB)</td>
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<td>Board Member Per Diem</td>
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<td>14,250</td>
<td>30,000</td>
</tr>
<tr>
<td><strong>Professional Services</strong></td>
<td>Accounting</td>
<td>26,143</td>
<td>15,716</td>
</tr>
<tr>
<td>Legal</td>
<td>14,489</td>
<td>0</td>
<td>25,000</td>
</tr>
<tr>
<td>Information Systems</td>
<td>108,316</td>
<td>86,431</td>
<td>125,000</td>
</tr>
<tr>
<td>Property Management</td>
<td>18,745</td>
<td>17,644</td>
<td>40,000</td>
</tr>
<tr>
<td>Temp. Labor</td>
<td>9,240</td>
<td>1,932</td>
<td>20,000</td>
</tr>
<tr>
<td>Prescription Monitoring Program</td>
<td>76,100</td>
<td>31,500</td>
<td>90,000</td>
</tr>
<tr>
<td><strong>Staff Expenses</strong></td>
<td>ED - Travel</td>
<td>9,204</td>
<td>2,840</td>
</tr>
<tr>
<td>GC - Travel</td>
<td>9,483</td>
<td>6,631</td>
<td>10,000</td>
</tr>
<tr>
<td>AED - Travel</td>
<td>6,025</td>
<td>5,782</td>
<td>10,000</td>
</tr>
<tr>
<td>CO - Travel</td>
<td>6,268</td>
<td>1,205</td>
<td>7,000</td>
</tr>
<tr>
<td>CO - Rental Cars &amp; Fuel</td>
<td>16,227</td>
<td>6,882</td>
<td>17,500</td>
</tr>
<tr>
<td>CO - Education</td>
<td>4,669</td>
<td>4,438</td>
<td>14,000</td>
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<tr>
<td>House Staff - Travel</td>
<td>75</td>
<td>0</td>
<td>1,000</td>
</tr>
<tr>
<td>Mileage</td>
<td>13,009</td>
<td>8,824</td>
<td>20,000</td>
</tr>
<tr>
<td><strong>Board Expenses</strong></td>
<td>Meeting Expenses</td>
<td>12,760</td>
<td>9,062</td>
</tr>
<tr>
<td>Committee Expenses</td>
<td>6,720</td>
<td>1,915</td>
<td>8,000</td>
</tr>
<tr>
<td>Conventions</td>
<td>17,742</td>
<td>13,210</td>
<td>20,000</td>
</tr>
<tr>
<td>Mileage</td>
<td>13,411</td>
<td>6,541</td>
<td>15,000</td>
</tr>
<tr>
<td>President's Expenses</td>
<td>9,063</td>
<td>4,252</td>
<td>10,000</td>
</tr>
<tr>
<td><strong>TOTAL EXPENSES</strong></td>
<td>2,582,629</td>
<td>1,346,155</td>
<td>3,309,500</td>
</tr>
</tbody>
</table>
Louisiana Board of Pharmacy  
FY 2016-2017  
Summary of Income Fund Balance Changes

**Summary**

<table>
<thead>
<tr>
<th></th>
<th>FY 15-16 Q4 06/30/2016</th>
<th>FY 16-17 Q2 12/31/2016</th>
<th>FY 16-17 Budget (A#1)</th>
</tr>
</thead>
</table>

**Income Statement**

<table>
<thead>
<tr>
<th></th>
<th>FY 15-16</th>
<th>FY 16-17</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenue</td>
<td>3,473,372</td>
<td>1,809,515</td>
<td>3,309,500</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>2,582,629</td>
<td>1,346,155</td>
<td>3,309,500</td>
</tr>
<tr>
<td>Net Ordinary Income</td>
<td>890,743</td>
<td>463,360</td>
<td>0</td>
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<tr>
<td>Other Income &amp; Expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investment</td>
<td>39,318</td>
<td>(85,464)</td>
<td>0</td>
</tr>
<tr>
<td>Net Income</td>
<td>930,061</td>
<td>377,896</td>
<td>0</td>
</tr>
</tbody>
</table>

**Fund Balance**

<table>
<thead>
<tr>
<th></th>
<th>FY 15-16 Q4 06/30/2016</th>
<th>FY 16-17 Q2 12/31/2016</th>
<th>FY 16-17 Budget (A#1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Fund Balance</td>
<td>363,796</td>
<td>1,293,857</td>
<td>1,293,857</td>
</tr>
<tr>
<td>Total Income</td>
<td>3,512,690</td>
<td>1,809,515</td>
<td>3,309,500</td>
</tr>
<tr>
<td>Total Expenses</td>
<td>2,582,629</td>
<td>1,431,619</td>
<td>3,309,500</td>
</tr>
<tr>
<td>Ending Fund Balance</td>
<td>1,293,857</td>
<td>1,671,753</td>
<td>1,293,857</td>
</tr>
<tr>
<td>Reservations of Fund Balance</td>
<td>772,000</td>
<td>1,750,000</td>
<td>1,750,000</td>
</tr>
<tr>
<td>Unreserved Fund Balance</td>
<td>521,857</td>
<td>(78,247)</td>
<td>(456,143)</td>
</tr>
</tbody>
</table>

*Notes on Reservation of Fund Balance*

<table>
<thead>
<tr>
<th></th>
<th>FY 16-17</th>
<th>FY 16-17</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net Pension Liability</td>
<td>0</td>
<td>1,000,000</td>
<td>1,000,000</td>
</tr>
<tr>
<td>Other Post Employment Benefits</td>
<td>572,000</td>
<td>500,000</td>
<td>500,000</td>
</tr>
<tr>
<td>Continuing Payroll Obligations</td>
<td>150,000</td>
<td>150,000</td>
<td>150,000</td>
</tr>
<tr>
<td>Land &amp; Building Maintenance</td>
<td>50,000</td>
<td>100,000</td>
<td>100,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>772,000</td>
<td>1,750,000</td>
<td>1,750,000</td>
</tr>
</tbody>
</table>
## Statement of Assets, Liabilities & Equity

<table>
<thead>
<tr>
<th>FY 15-16</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td><strong>Q4 06/30/2016</strong></td>
</tr>
<tr>
<td>Current Assets</td>
<td></td>
</tr>
<tr>
<td>Hancock Bank - Checking Account</td>
<td>83,305</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td>83,305</td>
</tr>
</tbody>
</table>

| **LIABILITIES** | | |
| Current Liabilities | 0 | 0 |

| **EQUITY** | | |
| Retained Earnings | 83,221 | 83,305 |
| Net Income | 84 | 43 |
| **TOTAL LIABILITIES & EQUITY** | 83,305 | 83,348 |

---

## Statement of Receipts & Disbursements

<table>
<thead>
<tr>
<th>FY 15-16</th>
<th>FY 16-17</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RECEIPTS</strong></td>
<td><strong>Q4 06/30/2016</strong></td>
</tr>
<tr>
<td>FEMA - Funds for payment of claims</td>
<td>8,920,812</td>
</tr>
<tr>
<td>FEMA - Administrative allowance</td>
<td>81,103</td>
</tr>
<tr>
<td>Pharmacies - reversal of claims</td>
<td>430,138</td>
</tr>
<tr>
<td>Interest income</td>
<td>22,230</td>
</tr>
<tr>
<td><strong>TOTAL RECEIPTS</strong></td>
<td>9,454,283</td>
</tr>
</tbody>
</table>

| **DISBURSEMENTS** | | |
| Claims paid to pharmacies | 8,920,812 | 8,920,812 |
| Reversed claim funds returned | 430,138 | 430,138 |
| Reversed administrative allowance returned | 7,338 | 7,338 |
| Interest earned on reversed admin. allowance returned | 12,690 | 12,690 |
| **TOTAL DISBURSEMENTS** | 9,370,978 | 9,370,978 |

| **FUND BALANCE** | | |
| | 83,305 | 83,348 |

---

**Note:** These funds are held in an account separate and apart from the Board's operating funds. Further, all recordkeeping is kept separate from the Board's general fund records. At the conclusion of the audit exposure period, any funds remaining will be transferred to the Board's operating account.
<table>
<thead>
<tr>
<th>Date</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/17/2015</td>
<td>Original Budget - Finance Committee Approval</td>
</tr>
<tr>
<td>11/18/2015</td>
<td>Original Budget - Board Approval</td>
</tr>
<tr>
<td>8/9/2016</td>
<td>Budget Amendment #1 - Finance Committee Approval</td>
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<tr>
<td>8/10/2016</td>
<td>Budget Amendment #1 - Board Approval</td>
</tr>
<tr>
<td></td>
<td>Budget Amendment #2 - Finance Committee Approval</td>
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<tr>
<td></td>
<td>Budget Amendment #2 - Board Approval</td>
</tr>
<tr>
<td></td>
<td>Acceptance of Final Report</td>
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</table>
### La Bd Of Pharmacy Opeb Res Act

**Acct Name:** LOUISIANA BOARD OF PHARMACY  3388 BRENTWOOD DR  BATON ROUGE LA 70809-1700  
**Acct No:** H5E049797  
**Acct Type:** Non-Profit Organization

<table>
<thead>
<tr>
<th>Asset Name</th>
<th>Ticker</th>
<th>Investment Objective</th>
<th>Mgt. Name</th>
<th>Quantity</th>
<th>Price ($)</th>
<th>Value ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BROKERAGE MONEY MARKET</td>
<td></td>
<td>CASH</td>
<td>BROKERAGE MONEY MARKET</td>
<td>9,060.11</td>
<td>1.00</td>
<td>9,060.11</td>
</tr>
<tr>
<td>UNITED STATES TREAS NTS 1.250% 03/31/21 B/EDTD 03/31/16</td>
<td></td>
<td>NON-CLASSIFIED</td>
<td></td>
<td>457,000.00</td>
<td>0.98</td>
<td>447,903.38</td>
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<tr>
<td>UNITED STATES TREAS NTS NOTE 1.62500% 06/30/2020</td>
<td></td>
<td>NON-CLASSIFIED</td>
<td></td>
<td>145,000.00</td>
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<td>145,074.66</td>
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<tr>
<td>US TREAS INFLAT PROT 912828N M8</td>
<td></td>
<td>LONG-TERM BOND</td>
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<td>25,000.00</td>
<td>1.17</td>
<td>29,407.88</td>
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<tr>
<td>US TREASURY SENIOR NOTE</td>
<td></td>
<td>NON-CLASSIFIED</td>
<td></td>
<td>593,000.00</td>
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<td>589,609.20</td>
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</tbody>
</table>

**Account Total** $1,221,055.23  
**Investor Total** $1,221,055.23
# La Bd Of Pharmacy Opeb Res Act

**Acct Name:** LA BD OF PHARMACY OPEB RES ACT  3388 BRENTWOOD DRIVE  BATON ROUGE LA 70809-1700  
**Acct No:** H5E077160  
**Acct Type:** Non-Profit Organization

<table>
<thead>
<tr>
<th>Asset Name</th>
<th>Ticker</th>
<th>Investment Objective</th>
<th>Mgt. Name</th>
<th>Quantity</th>
<th>Price ($)</th>
<th>Value ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BROKERAGE MONEY MARKET</td>
<td></td>
<td>CASH</td>
<td>BROKERAGE MONEY MARKET</td>
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<td>1.00</td>
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<tr>
<td>UNITED STATES TREAS NTS</td>
<td></td>
<td>NON-CLASSIFIED</td>
<td></td>
<td>728,000.00</td>
<td>0.98</td>
<td>713,509.11</td>
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<tr>
<td>1.2500% 03/31/21 B/EDTD 03/31/16</td>
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<td></td>
<td></td>
<td>61,000.00</td>
<td>1.00</td>
<td>61,031.41</td>
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<tr>
<td>UNITED STATES TREAS NTS NOTE</td>
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<td></td>
<td>63,000.00</td>
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<td>62,509.71</td>
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<tr>
<td>1.62500% 06/30/2020</td>
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<td></td>
<td></td>
<td>241,000.00</td>
<td>0.99</td>
<td>239,621.95</td>
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<tr>
<td>US TREASURY NT 1% UST NOTE</td>
<td>912828TC4</td>
<td>INTERMEDIATE GOVERNMENT</td>
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<td></td>
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<tr>
<td>DUE 06/30/19</td>
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<td></td>
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</tr>
<tr>
<td>US TREASURY SENIOR NOTE</td>
<td></td>
<td>NON-CLASSIFIED</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Account Total: $1,084,476.12  
Investor Total: $1,084,476.12
# Pension Reserve Account

**Holdings by Investor**

La Bd Of Pharmacy Opeb Res Act  
3388 Brentwood Dr  
Baton Rouge, LA 70809  

JOSEPH BARRECA, JR.  
H5E-102679  
Date: 01/01/2017  
Created: 01/13/2017

---

## La Bd Of Pharmacy Opeb Res Act

**Acct Name:** LA BD OF PHARMACY PENSION RES ACT 3388 BRENTWOOD DR BATON ROUGE LA 70809-1700  
**Acct No:** H5E102679  
**Acct Type:** Non-Profit Organization

<table>
<thead>
<tr>
<th>Asset Name</th>
<th>Ticker</th>
<th>Investment Objective</th>
<th>Mgt. Name</th>
<th>Quantity</th>
<th>Price ($)</th>
<th>Value ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>BROKERAGE MONEY MARKET</td>
<td>CASH</td>
<td></td>
<td>BROKERAGE MONEY MARKET</td>
<td>6,959.99</td>
<td>1.00</td>
<td>6,959.99</td>
</tr>
<tr>
<td>UNITED STATES TREAS NTS 1.250% 03/31/21 B/EDTD 03/31/16</td>
<td>NON-CLASSIFIED</td>
<td></td>
<td></td>
<td>648,000.00</td>
<td>0.98</td>
<td>635,101.52</td>
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<tr>
<td>UNITED STATES TREAS NTS NOTE 1.02500% 06/30/2020</td>
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<td></td>
<td>29,000.00</td>
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<td>29,014.93</td>
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<tr>
<td>US TREASURY SENIOR NOTE</td>
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<td></td>
<td></td>
<td>297,000.00</td>
<td>0.98</td>
<td>293,976.95</td>
</tr>
</tbody>
</table>

**Account Total**  
$965,053.38

**Investor Total**  
$965,053.38
NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
Reciprocity Committee
NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
NOTICE IS HEREBY GIVEN that a meeting of the Impairment Committee has been ordered and called for 2:00 p.m. on Tuesday, January 24, 2017 at the Board office, for the purpose to wit:

AGENDA

NOTE: This agenda is tentative until 24 hours in advance of the meeting, at which time the most recent revision becomes official.

Revised 01-19-2017

1. Call to Order

2. Quorum Call

3. Call for Additional Agenda Items & Adoption of Agenda

4. Opportunity for Public Comment

5. Review of Docket
   A. For Acceptance of Voluntary Surrenders of Credentials
   B. Petitions For Reinstatement of Suspended or Lapsed Credentials
      i. Case No. 16-0351 ~ PST.015681 – Scotty Paul Broussard
   C. Petitions for Modification of Previous Orders
   D. Applications for a Credential
   E. Appearances for Informal Conference
   F. Appearances for Guidance
      i. Case No. 17-0021 – PST.021377 – Amy Rebecca Douglass

6. Adjourn

NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
Reinstatement Committee
NOTICE IS HEREBY GIVEN that a meeting of the Reinstatement Committee has been ordered and called for 1:00 p.m. on Tuesday, January 24, 2017 in the Board office, for the purpose to wit:

AGENDA

NOTE: This agenda is tentative until 24 hours in advance of the meeting, at which time the most recent revision becomes official.

Revised 01-20-2017

1. Call to Order
2. Quorum Call
3. Call for Additional Agenda Items & Adoption of Agenda
4. Opportunity for Public Comment
5. Consideration of Applications
   A. Petitions for Reinstatement (suspended + lapsed > 5 years)
      i. Case No. 16-0357 ~ CPT.007660 – Cheenwah Davenport Honora
      ii. Case No. 17-0019 ~ PHY.005542 – Greenbrier Hospital Pharmacy
      iii. Case No. 17-0016 ~ CPT.006953 – Jeremy Jay Scott
   B. Petitions for Modification of Previous Orders
   C. Petitions for Return of Inactive Licenses to Active Status
      [Note: Appearances are not required for the remaining applicants.]
   D. Petitions for Reinstatement (suspended + lapsed > 5 years + chair’s discretion)
      i. CDS.011468.DDS – Edward Drew Clement
      ii. CPT.007185 – Amy Orcutt
   E. Applications for Reinstatement of CDS Licenses Lapsed > 5 years
      i. CDS.034629.MD – Michael T. Solomon
      ii. CDS.032896.DDS – Christopher Ryan Haygood
      iii. CDS.009498.MD – Gordon Lee Love
      iv. CDS.030122.MD – Richard W. Pearl
   F. Discretionary Approvals by Committee Chair (lapsed > 1 year but < 5 years)
      i. CDS.026365.MD – Jerome L. Buller
      ii. CDS.043725.DDS – Emily D. Wilhite
      iii. CDS.041870.MD – Colibri NeCole Jenkins
      iv. CDS.043903.DVM – Meredith Mouney

NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
NOTE: Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.

6. Adjourn
Tripartite Committee

NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
Regulation Revision Committee

NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
Executive Summary

• SCR 87 of the 2016 Legislature requested the Board of Pharmacy to study and make recommendations regarding the use of the terms ‘specialty drug’ and ‘specialty pharmacy’ and whether revisions to present laws, rules or regulations were necessary to ensure the terms are consistently used in Louisiana in such a way as to not inhibit patient access.

• The U.S. Congress adopted the FDA Amendments Act of 2007 which authorized the federal Food and Drug Administration to require drug manufacturers to submit and implement Risk Evaluations & Mitigation Strategies (REMS) as part of their application to the FDA for their approval of the drug product, to ensure the drug’s benefits will outweigh the risks.

• In their pursuit for drugs to cure diseases, American drug manufacturers employ high level technology, producing drug products that are more complex and costly than older medicines. Some of these newer drug products may require special handling, or perhaps more extensive clinical monitoring to prevent adverse reactions. Other special procedures may be required as part of REMS requirements imposed by the FDA. The term ‘specialty drugs’ has been coined to generally describe such drugs, to differentiate them from more traditional medicines.

• Pharmacies licensed by the board make business decisions as to which medicines to stock and dispense. Some of the special handling or other procedures required to dispense specialty drugs may have additional costs including additional professional health care practitioners. Pharmacies may elect to include specialty drugs in their inventory. Some have elected to specialize in the dispensing of specialty drugs, and many of these pharmacies have described themselves as ‘specialty pharmacies’.

• Specialty drugs are expensive, constituting 40% of the $310 billion spent for drugs in the U.S. in 2015; the projection is for that percentage to reach 55% in the year 2020.

• Pharmacy benefit managers have begun to limit their reimbursement for dispensing specialty drugs to specialty pharmacies or other pharmacies who have achieved additional accreditation beyond state licensure. These decisions have an adverse impact
on patient access to specialty drugs and limit their freedom of choice for their own
pharmacy.

- The board offers three recommendations and a legislative proposal to accomplish those
recommendations:
  - The term ‘specialty drug’ should be defined in terms of any unusual handling
    requirements or other special procedures related to the drug product; however, there
    should be no drug cost or price parameters included in the definition.
  - Because every pharmacy licensed by the board can legally dispense specialty drugs,
    the board views the term ‘specialty pharmacy’ generically. The board suggests the
    term not be specifically defined.
  - The board is concerned for the newly-emerging requirements for voluntary
    accreditation of pharmacies beyond their state licensure as a qualifier for the
    reimbursement of dispensing specialty drugs; such requirements can have a chilling
    effect on the patient’s freedom to choose their pharmacy.

Legislative Request

SCR 87 of the 2016 Legislature was authored by Sen. Johns and was enrolled on June 5, 2016.
The resolution requested the Louisiana Board of Pharmacy to study and make recommendations
regarding the use of the terms ‘specialty drug’ and ‘specialty pharmacy.’ The resolution noted
these terms are used by different stakeholders in the pharmacy community, with each segment of
the community creating their own definitions for the terms. Due to the inconsistent and
unregulated use of these terms, the resolution noted there were obstacles preventing patient
access to these critical medications. The resolution requested the Board to solicit input,
recommendations and advice from entities or individuals knowledgeable about access to
specialty drugs, including consumers, patients, medical providers, pharmacists, pharmacy benefit
managers, pharmaceutical drug manufacturers, and insurers. The resolution closed with a
request for the Board to submit a written report of its findings, together with any
recommendations in the form of proposed legislation, to the Louisiana Legislature no later than
February 1, 2017.
Drug Regulation

Within Section 8 of Article I of the United States Constitution, the United States Congress reserved unto itself the authority and power to regulate all matters relating to interstate commerce, which includes drug products. Although federal efforts to regulate the drug industry in this country date back to the Food & Drug Act of 1906, which prohibited the misbranding or adulteration of drug products offered for sale to the public, it was the Food, Drug & Cosmetic Act (FDCA) of 1938 that established the federal Food & Drug Administration (FDA). The law required that agency to approve all drug products offered for sale in this country, and required approval to be based on the safety of that product. Subsequent amendments of the FDCA have included the Durham-Humphrey Amendment of 1951, which established the dual market system of ‘prescription only’ (Rx) and ‘over-the-counter’ (OTC), with the former required for those drug products for which safe use requires medical supervision. The Kefauver-Harris Amendment of 1962 required the FDA to add efficacy of the drug product to its drug approval criteria. Although there have been other amendments to the FDCA over the years, for the purposes of this study, the FDA Amendments Act of 2007 are most relevant, for their effect of authorizing the FDA to require a drug manufacturer submit and implement Risk Evaluation & Mitigation Strategies (REMS) to ensure a drug’s benefits will outweigh its risks.

Drugs

The first drug products were derived from plants and other natural products. Pharmacists learned how to extract the active ingredient from the raw plant and then process that ingredient into a dosage form appropriate for use by the patient. These drug products, however, were primarily used for symptomatic relief; there were very few curative products at that time. During the late 1800s and early 1900s, there was a dramatic increase in drug research and development. Following World War II, American drug manufacturers merged technology with drug product production. New drugs and new dosage forms helped physicians to transition away from prescribing complex mixtures of ingredients toward ready-made single-ingredient medicines mass-manufactured by large drug companies. In the 1930s, about 75% of prescriptions required some compounding by a pharmacist; by 1950, that number dropped to about 25%. That trend
accelerated such that in 1960, that number was down to 4%, and in 1970, only one percent of all prescriptions required some compounding by a pharmacist.¹

Drug research and development has continued to progress, enabling researchers to study plants and animals at the cellular level. The last 50 years have seen dramatic increases in the use of this biotechnology to create new drugs to improve the treatment of symptoms and, in some instances, to cure diseases. Some of these new drug products are available in traditional dosage forms such as tablets, capsules, or simple injectable products. However, some products consist of sterile solutions of large complex proteins to be administered by intravenous infusion.

Due to the nature of some of these newer drug products, the drug product itself may require special handling. Some of the products may have potentially dangerous side effects requiring laboratory or other types of monitoring during the course of therapy. Some of the products may require an unusual dosing regimen with or without supplemental medications. Some of the products require more extensive patient education over and above the patient counseling provided at pharmacies. Over the past decade, the term ‘specialty drugs’ has evolved to describe drugs with these characteristics, to differentiate them from traditional prescription drugs dispensed at most community pharmacies.

Specialty Drugs

The differentiation of specialty drugs has been used to highlight the additional resources required of pharmacies that dispense these medications. Such resources may include more refrigerator and/or freezer capacity to provide proper storage. The clinical monitoring might require access to laboratory data or other information systems not usually available in most pharmacies. The intensive patient education may require more time by the pharmacist or other health care professional associated with the dispensing pharmacy.

Specialty drugs are somewhat limited in number, compared to the totality of the prescription drug market, but the forecast reveals a healthy drug development pipeline. Biotechnology costs more to produce drugs, and moreover, manufacturers are raising drug prices at will. The number of diseases or medical conditions is relatively small, but the list is growing with new products. The American population is aging, and older patients take more drugs.
Spending on specialty drugs doubled in the past five years, reaching $121 billion in 2015. By comparison, the total spending on medicines reach $310 billion in the same year. The increases in the spending for specialty drugs were driven primarily by treatments for hepatitis, autoimmune diseases, and cancer. The forecast for 2020 is for specialty drug spending to rise from its 40% of total drug spending to 55%. Forty-three new drugs were launched in 2015; innovative products include the first cancer vaccine and new treatments for congestive heart failure in ten years. The late phase drug research pipeline includes 2,320 new products, 25% of which are oncology drugs. Of the 630 drugs in Phase II trials, 37% are specialty drugs. Ten thousand Americans will celebrate their 65th birthday every day through the year 2030, when 20% of Americans will have reached that milestone. Generally, older patients take more medications. CVS Caremark, a major pharmacy benefits manager, reported only 5.1% of its members used specialty drugs in 2015, but those members consumed 34% of the total health care costs for the year.

Risk Evaluation & Mitigation Strategies (REMS)

Included in the FDA’s evaluation of manufacturer’s application for approval of a drug product is a consideration of the benefits of the drug for the intended patient population as well as the potential risks for adverse reactions. Some risks can be mitigated by implementation of additional procedures designed to assure optimal outcomes of drug therapy. Examples of REMS that could be implemented by a drug manufacturer include, but are not limited to, the following:

1. Medication Guide and/or Patient Package Insert, which are documents containing additional information to help patients understand and manage their drug therapy, and they are required to be delivered to the patient at the time of dispensing the drug product.

2. Communication Plan, which could include educational materials, suggested treatment protocols, or other information designed to assure safe outcomes of drug therapy, with such information being directed to prescribers and/or dispensers.

3. Elements to Assure Safe Use (ETASU) include a variety of procedures designed to assure the patient’s drug therapy is prescribed, dispensed, and monitored in such a manner to assure the safe use of the drug product, e.g.,
(a) Drug X will be prescribed only by prescribers who have been specifically certified by the manufacturer (or their agent) to prescribe that drug product;

(b) Drug X will be dispensed only by pharmacies which have been specifically certified by the manufacturer (or their agent) to dispense that drug product;

(c) Drug X will only be dispensed to patients with documentation of safe-use conditions, which places requirements on prescribers and/or dispensers to document the patient can safely receive and use the drug;

(d) Drug X will only be administered to patients within certain healthcare facilities where emergency medical resources are available, e.g., hospitals, outpatient surgery centers, ambulatory infusion centers, etc.;

(e) Manufacturer will ensure that patients receiving Drug X will be monitored by their prescriber or dispenser monthly for the duration of treatment with Drug X and for one month following discontinuation of Drug X; and/or

(f) Manufacturer will ensure that Drug X will only be dispensed to patients who are enrolled in the manufacturer’s REMS registry.

(4) The REMS Implementation Plan includes the establishment of a secure database containing necessary information for all entities included in the plan, including drug distributors, pharmacies, prescribers, and patients receiving the drug.

When the FDA approves a manufacturer’s drug product application with REMS elements described therein, the manufacturer is required to implement and maintain the REMS plan. The enabling legislation established severe financial penalties for noncompliance with REMS plans; moreover, continued noncompliance with REMS requirements could render a drug product misbranded, which immediately disqualifies the drug product from being dispensed in any pharmacy.

By the end of Calendar Year 2016, approximately 75 drug products were identified by the FDA as having FDA-approved REMS systems in place. The nature of the drug products varied widely and included a human insulin product as well as antidepressants, antipsychotics, and several drugs used for the treatment of different types of cancer. Some of the drugs are only
available in oral dosage forms such as tablets and capsules, while some of the drugs are only available as injectable dosage forms.

Pharmacies

When the owners of a community pharmacy implement their business plan, their acquisition of a permit from the Board of Pharmacy authorizes their pharmacy to purchase both prescription medications as well as OTC drugs and then offer them for sale to the general public. Since no single pharmacy could possibly keep in its stock every dosage form or strength of every drug product on the market, the pharmacy owner must make a business decision as to which drugs to maintain in their operating inventory. The drug distribution supply chain is well-developed in this country, meaning that most community pharmacies can place an order from a supplier for a drug not routinely stocked and receive it either the next day or certainly within a few days.

Every pharmacy is required to have adequate storage space for its drug inventory, as well as refrigerators for those drug products requiring such temperature controls. Beyond these minimum requirements, some pharmacies opt to include other special patient care areas in their pharmacies, e.g., patient counseling booths, private office space for extended consultations or medication administration, or classroom space for neighborhood health instruction events.

Every pharmacy must have a pharmacist designated as the Pharmacist-in-Charge. Beyond that pharmacist, the pharmacy must have an adequate staff (pharmacists, technicians, and clerical personnel) appropriate for their business operation. Depending on their business plan, some pharmacies opt to hire other medical professionals, e.g. nurses or phlebotomists. As an alternative to hiring other medical professionals, some pharmacies establish collaborative relationships with other entities, e.g., home health agencies, to have access to those medical professionals.

When a patient requires a medication for which the FDA has required the manufacturer to implement a REMS plan, the pharmacy should be able to comply with most of the potential risk mitigation strategies included in the plan, with the possible exception of those drugs requiring they be administered in healthcare facilities with emergency medical services available. If the pharmacy does not have, or cannot obtain, the resources necessary to comply with the REMS
requirement, the pharmacy should advise the patient and prescriber to arrange for a transfer to
another appropriate provider.

Within the total number of community pharmacies in the country, many of them choose
to operate as neighborhood pharmacies, catering to the full spectrum of pharmaceutical needs of
their customers. Other pharmacies choose to operate as high volume prescription shops, turning
away prescriptions that require compounding or other special handling. More recently, we have
seen a growth in the number of pharmacies that choose to forego traditional prescription
processing and specialize in prescriptions that require compounding or perhaps other special
handling. Over time, some of these pharmacies have elected to describe their operations as
specialty pharmacies.

While there is no single universal legally recognized definition of the term specialty
pharmacy, several organizations have defined the term for their own particular constituencies.

- The National Association of Specialty Pharmacies describes a specialty pharmacy
  as a state-licensed pharmacy that solely or largely provides only medications for
  people with serious health conditions requiring complex therapies. These include
  conditions such as cancer, hepatitis C, rheumatoid arthritis, HIV/AIDS, multiple
  sclerosis, cystic fibrosis, organ transplantation, human growth hormone
deficiencies, and hemophilia and other bleeding disorders. In addition to being
state-licensed and state-regulated, specialty pharmacies should be accredited by
independent third parties such Utilization Review Accreditation Commission
(URAC), the Accreditation Commission for Health Care (ACHC), the Center for
Pharmacy Practice Accreditation (CPPA), or The Joint Commission (TJC), to
ensure consistent quality of care.8

- The State Patient Access Coalition, an organization representing manufacturers of
specialty drugs and specialty pharmacies, describes a specialty pharmacy as a
pharmacy that provides the services and management necessary to ensure optimal
patient health outcomes when using a specialty drug, including but not limited to,
clinical monitoring, patient training, compliance assistance, and specialized
product handling and administration requirements.9
The Center for Pharmacy Practice Accreditation, an accreditation organization which offers voluntary accreditation services to pharmacies, describes a specialty pharmacy practice as a pharmacy practice created (1) to manage the medication access and handling requirements of specialty pharmaceuticals, including dispensing and distribution, and (2) to provide clinical management services for patients with chronic, serious, life-threatening and/or rare disease or conditions receiving specialty medications aimed toward achieving the desired patient therapeutic and economic outcomes.10

Through its legislative mandate to regulate the practice of pharmacy, the Board is authorized to establish different classifications of pharmacy permits. With one exception, the primary parameter used by the Board to differentiate pharmacies is the locale of its primary clientele. The Board currently issues pharmacy permits in the following classifications:

- Community permits are issued to both independently owned and chain pharmacies serving the general community population.
- Hospital permits are issued to pharmacies located within hospitals and they are restricted to serving patients of a hospital (in-patient and out-patient).
- Institutional permits are issued to pharmacies located within healthcare institutions, now primarily the methadone treatment centers.
- Nuclear permits are issued to nuclear pharmacies, which may be located in any setting approved by the La. Dept. of Environmental Quality and they are limited to the preparation and distribution of radioactive medications used for both diagnostic and therapeutic purposes.
- Penal permits are issued to pharmacies located within penal institutions and they are restricted to serving offenders/clients within those facilities.
- Charitable permits are issued to pharmacies owned and operated by charitable institutions and they are required to dispense their medications free of charge to qualified indigent patients.
- Nonresident permits are issued to pharmacies located in other states to facilitate their conduct of business in this state.

Community and hospital pharmacies have been dispensing specialty pharmaceutical
products to their patients for several years. Since every pharmacy licensed by the board is legally authorized to dispense specialty drugs, and the resources required to properly manage specialty drugs are within the purview of the owner of the pharmacy, there does not appear to be sufficient basis to establish a separate permit classification for specialty pharmacies.

**Patient Access to Specialty Drugs**

Manufacturers of specialty drugs have an interest in making sure the pharmacies that dispense specialty drugs have the appropriate resources to manage the REMS requirements attached to their drugs. In some cases, they have established a limited distribution system for their specialty drugs, to ensure they can monitor the pharmacies’ compliance with the REMS requirements. Such limited distribution systems can create patient access issues, or at the least, compromise the patients’ freedom of choice for their pharmacy services.

Given the high cost of many specialty drugs, insurance companies and other third party payors, including pharmacy benefit managers (PBMs), have a financial interest in making sure the pharmacies that dispense specialty drugs are competent to do so. Some of these stakeholders have begun to require the pharmacies, which are already licensed and regulated by the state, to acquire voluntary accreditations from URAC, ACHC, CPPA, or TJC, as a condition of reimbursement for dispensing the specialty drug. The requirement for the acquisition of additional credentials beyond the state-issued pharmacy permit can create patient access issues, or at the least, compromise the patients’ freedom of choice for their pharmacy services. That some PBMs operate specialty pharmacies in competition with other pharmacies has raised questions of transparency in their operations.

In the absence of a single universally-accepted definition of specialty drugs, some PBMs have adopted their own definition of that term, and some of those definitions have included the element of the price of the drug. For instance, in 2008 the federal Centers for Medicare & Medicaid Services (CMS) established the parameter of $600 per month, i.e., drug products whose cost exceeded $600 per month would qualify as specialty drugs if so desired by the PBM. In a recent communication, CMS reported the proportion of Medicare Part D claims that exceeded the $600 threshold increased from 0.78% in Calendar Year 2012 to 0.95% in Calendar Year 2014, and further, that the proportion of Medicare Part D expenditures related to specialty
drugs increased from 10.27% in Calendar Year 2012 to 16.22% in Calendar Year 2014. While
the use of a drug cost parameter may not apply to a large number of drugs at this time, the recent
trend of large price increases by drug manufacturers could have a negative impact on that current
finding. A larger number of drugs qualifying for specialty drug status can create patient access
issues, or at least, compromise the patients’ freedom of choice for their pharmacy services.

Recommendations

1. There is no single universally accepted definition for the term ‘specialty’ drug. While
many stakeholders include a variety of elements related to special handling requirements,
some stakeholders include a financial element relating to the cost of the drug. While the
former may be reasonable, the latter is arbitrary at best. The board is of the belief that no
financial element should be included in the definition of the term ‘specialty drug.’ The
board has approved a legislative proposal to define the term ‘specialty drug’, and that
proposal is appended to this report.

2. Since every pharmacy licensed by the board is legally authorized to dispense specialty
drugs, there seems to be no rational basis to define the term ‘specialty pharmacy.’ That
term can be used in a general sense by any pharmacy in their trade name. The board
recommends no specific definition for the term ‘specialty pharmacy.’

3. While voluntary accreditation programs can be useful in facilitating the adoption of best
practices, the requirement for such accreditations to qualify for reimbursement of the
dispensing of a specialty drug has a chilling effect on the patient’s access to such drugs.
Accordingly, the board recommends the adoption of a statutory provision that no entity
shall establish definitions or require accreditations or licensure which effectively limit
patient access to prescription drugs other than the appropriate governmental or regulatory
bodies.
Notes


3. Ibid.

4. Ibid.


9. Personal communication; Mr. Bill Speir; December 2, 2016.


PHARMACIES: Defines specialty drugs and prohibits any entity from establishing alternative
definitions for this term or adding any other requirements that will limit patient access to
prescription drugs.

AN ACT

To amend and reenact R.S. 22:1852, relative to definitions, and to enact R.S. 22:1857.2, relative
to access to specialty drugs.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 22:1852 is hereby amended and reenacted to read as follows:

§1852. Definitions

As used in this Subpart, the following terms shall be defined as follows:

* * *

(11.5) “Specialty drug” means a prescription drug which meets all of the
following criteria:

(a) The drug cannot be routinely dispensed at a majority of retail

community pharmacies due to physical or administrative requirements

that limit preparation and/or delivery in the retail community

pharmacy environment. Such drugs may include but are not limited to

CODING: Words in **stricken** type are proposed deletions from existing law; words **underscored** are proposed additions.
chemotherapy, radiation drugs, intravenous therapy drugs, biologic
prescription drugs approved for use by the federal Food and Drug
Administration, and/or other drugs that require physical facilities not
typically found in a retail community pharmacy, such as a ventilation
hood for preparation;

(b) The drug is used to treat complex, chronic, or rare medical conditions
   (i) That can be progressive;
   (ii) That can be debilitating or fatal if left untreated or
        undertreated; or
   (iii) For which there is no known cure.

(c) The drug requires special handling, storage, and/or has distribution
   and/or inventory limitations;

(d) The drug has a complex dosing regimen or requires specialized
    administration;

(e) Any drug that is considered to have limited distribution by the federal
    Food and Drug Administration;

(f) The drug requires
   (i) Complex and extended patient education or counseling;
   (ii) Intensive monitoring; or
   (iii) Clinical oversight; and

(g) The drug has significant side effects and/or risk profile

*    *    *
Section 2. R.S. 22:1857.2 is hereby enacted to read as follows:

§1857.2 Access to specialty drugs

A. No entity shall establish definitions, or require accreditation or licensure, effectively limiting access to prescription drugs, including specialty drugs as defined in R.S. 22:1852, other than the appropriate governmental or regulatory bodies.

B. In addition to the penalties provided in R.S. 22:1860, any violation of the provisions of Subsection A of this Section shall be deemed an unfair or deceptive act and practice pursuant to R.S. 22:1961 et seq. and shall be subject to the penalties provided therein.
CONTROLLED SUBSTANCES: Adds U-47700, furanylfentanyl, acrylfentanyl, and etizolam to Schedule I, thiafentanil to Schedule II, and brivaracetam to Schedule V.

AN ACT

To amend and reenact R.S. 40:964, relative to the composition of various schedules of controlled substances.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:964 is hereby amended and reenacted to read as follows:

§964. Composition of schedules

    Schedule I

    A. Opiates

        Unless specifically excepted or unless listed in another schedule, any of the following opiates, including their isomers, esters, ethers, salts, or salts of isomers, esters, and ethers, whenever the existence of such isomers, esters, ethers, or salts is possible within the specific chemical designation:

        *(57) U-47700 (3,4-dichloro-N-[2-(dimethylamino)cyclohexyl]-N-
methylbenzamide)

*(58) Furanylfentanyl (N-phenyl-N-[1-(2-phenylethyl)piperidin-4-
yl]furan-2-carboxamide)

*(59) Acrylfentanyl (N-(1-phenetyl)piperidin-4-yl)-N-phenylacrylamide)

D. Depressants

*  *  *

(5) Etizolam

*  *  *

Schedule II

*  *  *

B. Opiates

*  *  *

(29) Thiafentanil

*  *  *

Schedule V

*  *  *

D. Depressants

*  *  *

(4) Brivaracetam ((2S)-2-[(4R)-2-oxo-4-propylpyrrolidin-1-yl] butanamide), also referred to as BRV; UCB-34714; Briviat.
CONTROLLED SUBSTANCES: Adds third party logistics providers as entities required to obtain a controlled dangerous substance license and sets the fee for that license.

AN ACT

To amend and reenact R.S. 40:961, relative to definitions, R.S. 40:972.B, relative to fees, and R.S. 40:973, relative to licensing requirements.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:961 is hereby amended and reenacted to read as follows:

§961. Definitions

As used in this Part, the following terms shall have the meaning ascribed to them in this Section unless the context clearly indicates otherwise:

*       *       *

(38.1) “Third-party logistics provider” means a person that provides or coordinates warehousing, facilitation of delivery, or other logistic services for a legend drug or legend device in interstate and intrastate commerce on behalf of a manufacturer, distributor, or dispenser of a legend drug or legend device but does not take ownership of the legend drug or legend device nor have responsibility to direct the sale or disposition of the legend drug or legend device.
Section 2. R.S. 40:972.B is hereby amended and reenacted to read as follows:

§972. Rules and regulations and fees

B. The fees collected by the Board of Pharmacy and registration and licensing shall not exceed the following schedule:

(6) Wholesaler / distributor, including third party logistics provider $50

Section 3. R.S. 40:973.A is hereby amended and reenacted to read as follows:

§973. Licensing requirements

A. Every person who manufacturers, distributes (including third-party logistics providers), or dispenses any controlled dangerous substance within this state or who proposes to engage in the manufacture, distribution (including third-party logistics providers), or dispensing of any controlled dangerous substance within this state, shall obtain a license issued by the Board of Pharmacy in accordance with the rules and regulations promulgated by it.
CONTROLLED SUBSTANCES: Adds audit trail information to Prescription Monitoring Program and provides for its disclosure; adds additional persons authorized to access prescription monitoring information; updates immunity provisions for board and advisory council.

AN ACT

To amend and reenact R.S. 40:1003, relative to definitions, and R.S. 40:1007, relative to access to prescription monitoring information.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 40:1003 and R.S. 40:1007 are hereby amended and reenacted to read as follows:

§1003. Definitions

* * *

(3) “Audit trail information” means information submitted and/or produced regarding requests for prescription monitoring program data that the board or other specified by this Part use to help monitor compliance with this Part and other applicable statutes, rules, or regulations.

* * *

CODING: Words in strikethrough type are proposed deletions from existing law; words underscored are proposed additions.
§1007. Access to prescription monitoring information and audit trail information

A. Except as provided in Subsections C, D, E, F, G, H, and I of this Section, prescription monitoring information submitted to the board and audit trail information shall be protected health information, not subject to public or open records law, including but not limited to R.S. 44:1 \textit{et. seq.}, and not subject to disclosure. Prescription monitoring information and audit trail information shall not be available for civil subpoena from the board nor shall such information be disclosed, discoverable, or compelled to be produced in any civil proceeding for any reason. Notwithstanding this provision, law enforcement and professional licensing, certification, and regulatory agencies may utilize prescription monitoring information and audit trail information in the course of any investigation and subsequent criminal and administrative proceedings, but only in accordance with federal and state law and the requirements of this Part.

B. The board shall maintain procedures to ensure that the privacy and confidentiality of patients and patient information collected, recorded, transmitted, and maintained, as well as audit trail information, is not disclosed to persons or entities except as in Subsections C, D, E, F, G, H, and I, and J of this Section.

*   *   *   *

E. The following persons, after successful completion of the educational courses identified in R.S. 40:1008, may access prescription monitoring information at no cost and in the same or similar manner, and for the same or similar
purposes, as those persons are authorized to access similar protected health
information under federal and state law and regulation:

*    *    *    *

(5) A medical examiner or coroner, or a delegate thereof, for the purpose
of investigating an individual’s death.

(6) A licensed substance abuse addiction counselor providing services to
a state licensed substance abuse addiction treatment program.

(7) A probation or parole officer for the purpose of monitoring an
offender’s compliance with participation in a drug diversion program
or with other conditions of probation or parole related to monitored
drugs.

F. The board may provide a report containing prescription monitoring
information upon application of local, state, out-of-state, and federal law
enforcement or prosecutorial officials, including judicially-supervised drug
courts, engaged in the administration, investigation, or enforcement of the
laws governing controlled substances or other drugs of concern in compliance
with and as limited by the relevant requirements of any of the following:

*    *    *    *

I. The board may provide prescription monitoring information to the following
in accordance with procedures established by board regulation:

   (1) an individual who requests his personal prescription monitoring
information in accordance with procedures established by board
regulation.

Page 3 of 6

CODING: Words in stricken type are proposed deletions from existing law; words underscored are proposed additions.
(2) a parent, legal guardian, or legal health care agent, for the purpose of reviewing the history of dispensed monitored drug to a child or an individual for whom the agent makes health care decisions, to the extent consistent with federal and state confidentiality laws and regulations.

(3) An executor of a will, or a court-appointed executor of an estate, for the purposes of reviewing the history of dispensed monitored drugs to a deceased individual.

J. The board may disclose audit trail information to individuals identified in Subsection E(2), Subsection F, and Subsection I for use in an active investigation of an individual who submitted requests for prescription monitoring information.

J.K. The board and advisory council shall be immune from civil liability arising from inaccuracy of any of the information submitted to the board pursuant to this Part.

(1) The board and advisory council shall not be subject to civil liability, administrative action, or other legal or equitable relief for the:

(a) _Failure to possess prescription monitoring information that was not reported to the board;

(b) _Release of prescription monitoring information or audit trail information that was factually incorrect;

(c) _Release of prescription monitoring information or audit trail information to the wrong person or entity; or
(d) Unlawful access to prescription monitoring information by an individual, or unlawful disclosure or use of prescription monitoring information by an individual who requested and received prescription monitoring information pursuant to this Section.

(2) A dispenser or reporting agent shall not be subject to civil liability, administrative action, or other legal or equitable relief for reporting prescription monitoring information to the board.

(3) A prescriber, dispenser, or other individual, agency, or entity in proper possession of prescription monitoring information or audit trail information pursuant to this Part shall not be subject to civil liability, administrative action, or other legal or equitable relief for accessing, using, or disclosing prescription monitoring information or audit trail information pursuant to the provisions of this Section.

§1008. Education and treatment

A. The board shall, in consultation with an upon recommendation of the advisory council, implement the following education courses:

(1) An orientation course during the implementation phase of the prescription monitoring program.

(2) A course for persons who are authorized to access the prescription monitoring information, but who did not participate in the orientation course.

(3) (1) …

(4) (2) …
§1009. Unlawful acts and penalties

A. A dispenser who fails to submit prescription monitoring information to the board as required by this Part, or who fails to correct or amend data after notification by the board, shall be referred to the appropriate professional licensing, certification, or regulatory agency for administrative sanctions as deemed appropriate by that agency.

B. A person or entity authorized to possess prescription monitoring information pursuant to this Part who knowingly accesses or discloses such information in violation of this Part shall be referred to the appropriate professional licensing, certification, or regulatory agency for administrative sanctions as deemed appropriate by that agency and may, upon criminal conviction, be imprisoned, with or without hard labor, for not more than five years, and in addition, may be fined not more than five thousand dollars.
Executive Committee
NOTICE IS HEREBY GIVEN that a meeting of the Executive Committee has been ordered and called to immediately follow the meeting of the Impairment Committee (scheduled for 2:00 p.m.) on Tuesday, January 24, 2017 at the Board office [estimated time for Executive Committee at 3:00 p.m.], for the purpose to wit:

**AGENDA**

NOTE: This agenda is tentative until 24 hours in advance of the meeting, at which time the most recent revision becomes official.

Revised 01-21-2017

1. Call to Order
2. Quorum Call
3. Call for Additional Agenda Items & Adoption of Agenda
4. Opportunity for Public Comment
5. Consideration of Contracts & Agreements
   A. Resolutions for Professional Legal Services
   B. Contracts & Agreements
6. Review of Administrative Operations
7. Adjourn

**NOTE:** Pursuant to the Open Meetings Law at La. R.S. 42:16, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, (4) discussions regarding personnel matters, or other purposes itemized at La. R.S. 42:17.
RESOLUTION

The following Motion and Resolution was offered by Mr. Morris Rabb who moved for its adoption, and seconded by Mr. Marty McKay at the January 25, 2017 meeting of the Louisiana Board of Pharmacy (the “Board”):

WHEREAS, the Board has one attorney on staff and he supervises the Board’s compliance officers’ investigations, and further, the Board desires to avoid any appearance of impropriety that might arise should that attorney also attempt to serve as the Board’s prosecutor, and further, there is a need for an attorney experienced in administrative law to provide prosecutorial services during its administrative hearings, and further, to provide additional representation when the Board’s decisions are appealed to the judiciary, and further, to provide legal representation to the Board and its staff when sued in their official capacities in a court of law; and

WHEREAS, the Board has worked with Celia R. Cangelosi in the same capacity for over fifteen years, providing the experience as prosecuting attorney, with additional experience in representing the Board’s interests in the 19th Judicial District Court, the First Circuit Court of Appeals; and the Louisiana Supreme Court; and

WHEREAS, the Board’s proposed contract with Celia R. Cangelosi specifies an hourly rate of two hundred twenty five dollars ($225) per hour of service, and further, provides for reimbursement of certain expenses when submitted in compliance with the Division of Administration’s regulations governing such, and further, provides the total compensation, including all fees and reimbursements, shall not exceed one hundred thousand dollars ($100,000) for Fiscal Year 2017-2018; and

WHEREAS, there is no authority for payment of a contingency fee; and

WHEREAS, this resolution shall take effect on July 1, 2017.

THEREFORE BE IT RESOLVED that the Louisiana Board of Pharmacy, pursuant to La. R.S. 42:262, does hereby retain and employ Celia R. Cangelosi as special counsel; and

BE IT FURTHER RESOLVED, that this Resolution and proposed contract described herein be submitted to the Attorney General for the State of Louisiana for approval.

The resolution having been submitted to a vote, the vote thereon was as follows:

YEAS: 16
NAYS: 0
ABSENT: (None)
NOT VOTING: Carl W. Aron (Chair)

Whereupon the Resolution was declared adopted by the Louisiana Board of Pharmacy on the 25th day of January 2017.

I, Carl W. Aron, President of the Louisiana Board of Pharmacy, hereby certify the above and foregoing to be a true and exact copy of a resolution adopted by the Board at its meeting held January 25, 2017, at which a quorum was present, and the same has not been revoked, rescinded or altered in any manner, and is in full force and effect.

Witness my hand this 25th day of January, 2017.
RESOLUTION

The following Motion and Resolution was offered by Mr. Morris Rabb who moved for its adoption, and seconded by Mr. Marty McKay at the January 25, 2017 meeting of the Louisiana Board of Pharmacy (the “Board”):

WHEREAS, the Board has one attorney on staff and he supervises the Board’s compliance officers’ investigations, and further, the Board desires to avoid any appearance of impropriety that might arise should that attorney also attempt to serve as an advisor to the Board’s Hearing Officer, and further, there is a need for an attorney experienced in administrative law to provide advisory services to the Board’s Hearing Officer during its administrative hearings, or to serve as the Hearing Officer; and further, to provide legal representation to the Board and its staff when sued in their official capacities in a court of law, as well as other professional legal services as may be requested by the Board from time to time; and

WHEREAS, the Board has worked with Shows, Cali & Walsh, LLP in the same capacity for over ten years, where they have provided advisory services to the Board’s Hearing Officer as well as serving as the Hearing Officer from time to time; and further, they represented the Board and its staff during a suit against the Board during 2013; and

WHEREAS, the Board’s proposed contract with Shows, Cali & Walsh, LLP specifies an hourly rate of two hundred twenty-five ($225) per hour of service, and further, provides for reimbursement of certain expenses when submitted in compliance with the Division of Administration’s regulations governing such, and further, provides the total compensation, including all fees and reimbursements, shall not exceed fifty thousand dollars ($50,000) for Fiscal Year 2017-2018; and

WHEREAS, there is no authority for payment of a contingency fee; and

WHEREAS, this resolution shall take effect on July 1, 2017.

THEREFORE BE IT RESOLVED that the Louisiana Board of Pharmacy, pursuant to La. R.S. 42:262, does hereby retain and employ Shows, Cali & Walsh, LLP as special counsel; and

BE IT FURTHER RESOLVED, that this Resolution and proposed contract described herein be submitted to the Attorney General for the State of Louisiana for approval.

The resolution having been submitted to a vote, the vote thereon was as follows:

YEAS: 16
NAYS: 0
ABSENT: (None)
NOT VOTING: Carl W. Aron (Chair)

Whereupon the Resolution was declared adopted by the Louisiana Board of Pharmacy on the 25th day of January, 2017.

I, Carl W. Aron, President of the Louisiana Board of Pharmacy, hereby certify the above and foregoing to be a true and exact copy of a resolution adopted by the Board at its meeting held January 25, 2017, at which a quorum was present, and the same has not been revoked, rescinded or altered in any manner, and is in full force and effect.

Witness my hand this 25th day of January, 2017.
### PROPOSED CONTRACTS / AGREEMENTS
#### Fiscal Year 2017-2018

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Celia Cangelosi</td>
<td>Legal</td>
<td>$195/hr maximum $80,000</td>
<td>$195/hr maximum $80,000</td>
<td>$225/hr maximum $80,000</td>
<td>$225/hr maximum $100,000</td>
<td>$225/hr maximum $100,000</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>E. Wade Shows</td>
<td>Legal</td>
<td>$175/hr maximum $40,000</td>
<td>$175/hr maximum $40,000</td>
<td>$225/hr maximum $40,000</td>
<td>$225/hr maximum $50,000</td>
<td>$225/hr maximum $50,000</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Kölder, Champagne, Slaven</td>
<td>CPA</td>
<td>$70/hr - prepare bank reconciliations, journal entries, financial statements</td>
<td>$75/hr - prepare bank reconciliations, journal entries, financial statements</td>
<td>$75/hr - prepare bank reconciliations, journal entries, financial statements</td>
<td>$80/hr - prepare bank reconciliations, journal entries, financial statements</td>
<td>$80/hr - prepare bank reconciliations, journal entries, financial statements</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$130/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$145/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$160/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$165/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$165/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>$180/hr - oversight and final approval of accounting work</td>
<td>$180/hr - oversight and final approval of accounting work</td>
<td>$180/hr - oversight and final approval of accounting work</td>
<td>$200/hr - oversight and final approval of accounting work</td>
<td>$200/hr - oversight and final approval of accounting work</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Kolder, Champagne, Slaven</td>
<td>CPA</td>
<td>$130/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$145/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$160/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$165/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>$165/hr - review bank reconciliations, adjusting journal entries, and financial statements</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Appriss (05/18/15 - present)</td>
<td>CPA</td>
<td>$76,100</td>
<td>$74,900</td>
<td>$73,700</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Essential Solutions</td>
<td>IT Support</td>
<td>$2,500/mo (July - June)</td>
<td>$2,500/mo (July - June)</td>
<td>$2,500/mo (July - June)</td>
<td>$2,500/mo (July - June)</td>
<td>$2,500/mo (July - June)</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>MicroPact (CAVU/Iron Data)</td>
<td>Database</td>
<td>$69,000 (plus additional for software upgrade)</td>
<td>$63,600 (plus additional for software upgrade)</td>
<td>$63,600 (plus additional for software upgrade)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

To be sent to DHH / Contracts & Procurement Department

New proposed contract terms
Report of Assistant Executive Director

NOTE: Pursuant to the Open Meetings Law, at LRS 42:6.1, the committee may, upon 2/3 affirmative vote of those members present and voting, enter into executive session for the limited purposes of (1) discussion of the character, professional competence, or physical or mental health of a licensee, (2) investigative proceedings regarding allegations of misconduct, (3) strategy sessions or negotiations with respect to litigation, or (4) discussions regarding personnel matters.
PRESCRIPTION MONITORING PROGRAM (PMP)

BOARD MEETING - JANUARY 25, 2017
NUMBER OF ELIGIBLE PRESCRIPTION TRANSACTIONS REPORTED TO THE PMP

Total Reported: 105,732,798
(06/01/2008 through 12/31/2016)
PRESCRIBER & PHARMACIST SEARCHES – 2016

Total for 2016: 2,906,904

- 1st Quarter: Prescribers 407,377, Pharmacists 296,521
- 2nd Quarter: Prescribers 413,705, Pharmacists 291,623
- 3rd Quarter: Prescribers 465,144, Pharmacists 293,646
- 4th Quarter: Prescribers 454,023, Pharmacists 284,865
PRESCRIBER & PHARMACIST SEARCHES
(01/01/2009 THROUGH 12/31/2016)

Overall Search Total: 48,874,484

Prescribers
Pharmacists

235,985 368,376 496,270 650,514 842,139 969,726 1,066,781 1,166,657
74,277 111,075 153,783 212,754 382,204 460,522 1,066,781 1,166,657

1,447,593 1,447,593 1,447,593 1,447,593 1,447,593 1,447,593 1,740,249 1,740,249
1,066,781 1,066,781 1,066,781 1,066,781 1,066,781 1,066,781 1,166,657 1,166,657

0 1,000,000 2,000,000 3,000,000 4,000,000 5,000,000 6,000,000 7,000,000 8,000,000 9,000,000 10,000,000 11,000,000 12,000,000 13,000,000 14,000,000 15,000,000 16,000,000 17,000,000 18,000,000 19,000,000
## PMP User Statistics for 2016Q4 (10/01/2016 through 12/31/2016)

<table>
<thead>
<tr>
<th>PMP Role Title - Healthcare Provider</th>
<th>Number of Providers Eligible for PMP Access (as of 12/31/2016)</th>
<th>Number of Providers Approved for PMP Access (as of 12/31/2016)</th>
<th>Number of Approved Providers Performing PMP Searches During 2016Q4</th>
<th>Number of PMP Searches by Approved Providers During 2016Q4 (Percentage of Total Searches)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician (MD, DO)</td>
<td>12,362</td>
<td>4,416</td>
<td>2,061</td>
<td>259,651 (35.14%)</td>
</tr>
<tr>
<td>Nurse Practitioner (APRN)</td>
<td>2,442</td>
<td>1,224</td>
<td>734</td>
<td>43,295 (5.86%)</td>
</tr>
<tr>
<td>Dentist (DDS)</td>
<td>2,122</td>
<td>537</td>
<td>163</td>
<td>1,620 (0.22%)</td>
</tr>
<tr>
<td>Physician Assistant (PA)</td>
<td>678</td>
<td>262</td>
<td>155</td>
<td>7,571 (1.02%)</td>
</tr>
<tr>
<td>Optometrist (OD)</td>
<td>338</td>
<td>13</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Podiatrist (DPM)</td>
<td>148</td>
<td>34</td>
<td>9</td>
<td>108 (0.01%)</td>
</tr>
<tr>
<td>Medical Psychologist (MP)</td>
<td>86</td>
<td>62</td>
<td>34</td>
<td>1,786 (0.24%)</td>
</tr>
<tr>
<td>Prescriber's Delegate</td>
<td>NA</td>
<td>1,478</td>
<td>679</td>
<td>139,992 (18.95%)</td>
</tr>
<tr>
<td>Pharmacist (PST)</td>
<td>8,647</td>
<td>3,620</td>
<td>2,303</td>
<td>262,316 (35.50%)</td>
</tr>
<tr>
<td>Pharmacist's Delegate</td>
<td>NA</td>
<td>515</td>
<td>236</td>
<td>22,549 (3.05%)</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>26,823</strong></td>
<td><strong>12,161</strong></td>
<td><strong>6,374</strong></td>
<td><strong>738,888</strong></td>
</tr>
</tbody>
</table>

## PMP User Statistics for 2016Q3 (07/01/2016 through 09/30/2016)

<table>
<thead>
<tr>
<th>PMP Role Title - Healthcare Provider</th>
<th>Number of Providers Eligible for PMP Access (as of 10/24/2016)</th>
<th>Number of Providers Approved for PMP Access (as of 10/24/2016)</th>
<th>Number of Approved Providers Performing PMP Searches During 2016Q3</th>
<th>Number of PMP Searches by Approved Providers During 2016Q3 (Percentage of Total Searches)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physician (MD, DO)</td>
<td>12,342</td>
<td>4,272</td>
<td>2,070</td>
<td>269,096 (35.46%)</td>
</tr>
<tr>
<td>Nurse Practitioner (APRN)</td>
<td>2,377</td>
<td>1,165</td>
<td>706</td>
<td>45,871 (6.04%)</td>
</tr>
<tr>
<td>Dentist (DDS)</td>
<td>2,107</td>
<td>526</td>
<td>161</td>
<td>1,465 (0.19%)</td>
</tr>
<tr>
<td>Physician Assistant (PA)</td>
<td>640</td>
<td>247</td>
<td>142</td>
<td>7,938 (1.05%)</td>
</tr>
<tr>
<td>Optometrist (OD)</td>
<td>337</td>
<td>13</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Podiatrist (DPM)</td>
<td>150</td>
<td>33</td>
<td>12</td>
<td>127 (0.02%)</td>
</tr>
<tr>
<td>Medical Psychologist (MP)</td>
<td>85</td>
<td>58</td>
<td>28</td>
<td>1,641 (0.22%)</td>
</tr>
<tr>
<td>Prescriber's Delegate</td>
<td>NA</td>
<td>1,422</td>
<td>675</td>
<td>139,006 (18.32%)</td>
</tr>
<tr>
<td>Pharmacist (PST)</td>
<td>8,587</td>
<td>3,554</td>
<td>2,243</td>
<td>271,090 (35.73%)</td>
</tr>
<tr>
<td>Pharmacist's Delegate</td>
<td>NA</td>
<td>467</td>
<td>225</td>
<td>22,556 (2.97%)</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>26,625</strong></td>
<td><strong>11,757</strong></td>
<td><strong>6,262</strong></td>
<td><strong>758,790</strong></td>
</tr>
</tbody>
</table>
Total Number of Law Enforcement Requests Processed: 7,686
01/01/2009 through 12/31/2016
PMP STATISTICS FOR 2016

12.4m CDS RXs

5.6m Narcotic RXs
- 2.4m Hydrocodone Prescriptions
- 1.0m Tramadol Prescriptions
- 0.9m Oxycodone Prescriptions

3.6m Depressant RXs

2.1m Stimulant RXs
### TOP CDS BY LABEL NAME - 2016

<table>
<thead>
<tr>
<th>Label Name</th>
<th>Number of Prescriptions</th>
<th>Total Units Dispensed</th>
</tr>
</thead>
<tbody>
<tr>
<td>HYDROCODONE-APAP 10mg-325mg</td>
<td>1,134,992</td>
<td>84,713,832</td>
</tr>
<tr>
<td>TRAMADOL HCL 50 MG TABLET</td>
<td>975,537</td>
<td>65,742,114</td>
</tr>
<tr>
<td>HYDROCODONE-APAP 7.5mg-325mg</td>
<td>599,483</td>
<td>25,362,244</td>
</tr>
<tr>
<td>HYDROCODONE-APAP 5mg-325mg</td>
<td>575,255</td>
<td>18,417,263</td>
</tr>
<tr>
<td>ZOLPIDEM TARTRATE 10 MG TABLET</td>
<td>512,753</td>
<td>16,157,638</td>
</tr>
<tr>
<td>ALPRAZOLAM 0.5 MG TABLET</td>
<td>437,175</td>
<td>23,594,764</td>
</tr>
<tr>
<td>OXYCODONE-APAP 10mg</td>
<td>377,013</td>
<td>30,248,215</td>
</tr>
<tr>
<td>ALPRAZOLAM 1 MG TABLET</td>
<td>316,590</td>
<td>20,207,395</td>
</tr>
<tr>
<td>CLONAZEPAM 1 MG TABLET</td>
<td>279,482</td>
<td>15,813,361</td>
</tr>
<tr>
<td>CLONAZEPAM 0.5 MG TABLET</td>
<td>276,798</td>
<td>13,951,268</td>
</tr>
</tbody>
</table>
Requests for Full Exemption from PMP Reporting  
January 25th, 2017

In accordance with LA.R.S:40.4.X-A.1006.C. The board may issue an exemption from the reporting requirement to a dispenser whose practice activities are inconsistent with the intent of the program. The board may rescind any previously issued exemption without the need for an informal or formal hearing.

<table>
<thead>
<tr>
<th>Permit</th>
<th>Permit Type</th>
<th>Name</th>
<th>Scope of Practice</th>
<th>DEA</th>
<th>City</th>
<th>State</th>
</tr>
</thead>
<tbody>
<tr>
<td>7104</td>
<td>NR</td>
<td>CPP Pet Care</td>
<td>Veterinary Mail Order Pharmacy</td>
<td>No</td>
<td>Hayward</td>
<td>CA</td>
</tr>
<tr>
<td>4670</td>
<td>NR</td>
<td>CVS Pharmacy #6570</td>
<td>Non-Resident Pharmacy</td>
<td>No</td>
<td>Indianapolis</td>
<td>IN</td>
</tr>
<tr>
<td>7335</td>
<td>NR</td>
<td>Factor One Source Pharmacy</td>
<td>Specialty Pharmacy</td>
<td>Yes</td>
<td>Cumberland</td>
<td>MD</td>
</tr>
<tr>
<td>7398</td>
<td>NR</td>
<td>Rapid Equine Solutions, LLC</td>
<td>Compounding Pharmacy</td>
<td>No</td>
<td>Aston</td>
<td>PA</td>
</tr>
<tr>
<td>7336</td>
<td>NR</td>
<td>Senderra RX Pharmacy</td>
<td>Prescription Data Processing</td>
<td>No</td>
<td>Dallas</td>
<td>TX</td>
</tr>
<tr>
<td>6482</td>
<td>NR</td>
<td>Senderra RX</td>
<td>Specialty Pharmacy</td>
<td>Yes</td>
<td>Richardson</td>
<td>TX</td>
</tr>
</tbody>
</table>

**Staff Recommendation**

Approve the proposed waivers conditioned upon execution of the standard Consent Agreement:

**EXEMPTION TO PRESCRIPTION MONITORING PROGRAM REPORTING REQUIREMENTS**

**CONSENT AGREEMENT**

WHEREAS, in order to facilitate the pharmacy’s request for an exemption to the reporting requirements to the Louisiana Board of Pharmacy’s Prescription Monitoring Program (PMP) as required by law, the Pharmacy indicated below agrees to the following terms:

1. The Pharmacy shall not be authorized to dispense any controlled dangerous substances (CDS) or drugs of concern, with the exception of a hospital pharmacy permit’s inpatient dispensing, as identified by the Louisiana Board of Pharmacy (Board) by regulation.
2. Upon the first instance of receipt of evidence by the Board indicating the Pharmacy dispensed CDS or drugs of concern, the Pharmacy agrees to the following sanction:
   The Pharmacy agrees to pay a fine of $5,000.00 and reimburse the Board $250.00 in administrative hearing costs, with total payment due the Board of $5,250.00, due by certified check or money order within 30 days of notice of this prohibited activity.
3. Upon the second instance of receipt of evidence indicating the Pharmacy dispensed CDS or drugs of concern, the Pharmacy agrees to pay the above sanction, the termination of this exemption and the resumption of its reporting to the PMP.
4. The Pharmacy shall post a copy of this agreement adjacent or attached to its pharmacy permit.

By signing this Consent Agreement, Respondent agrees that the Board has jurisdiction in this matter and waives all rights to informal conference, to Notice of Hearing, to a formal Administrative Hearing, and to judicial review of this Consent Agreement.
Report of General Counsel
Report of Executive Director
January 25, 2017

Agenda Item 11-L: Report of Executive Director

1. Meeting Activity
   In addition to Board and committee meetings, I have also participated in or attended the following meetings since the last Board meeting.
   - Nov. 21: ULM School of Pharmacy – P-1 Orientation
   - Jan. 11: La. Pharmacy Congress
   - Jan. 18: Prescription Monitoring Program Advisory Council
   - Jan. 19: Pharmacy Executive Board Mtg

2. Reports (all in the Boardroom Library)
   A. Census Reports
      1. Compliance Division – Practitioner Recovery Program & Discipline
      2. Credentials Division – CDS & Pharmacy Programs
   B. Credentials Division Production Reports
      1. Licensure Activity Report [new credentials in previous quarter]
      2. Application Activity Report [pending applications count]
   C. Exceptions Report
      1. PIC in Multiple Locations
      2. Resurrected Credentials / Special Work Permits

3. Examinations
   A. MPJE – the results for the third trimester of 2016 are not yet available.
   B. NAPLEX – the results for the third trimester of 2016 are not yet available.
   C. PARE – our last administration of this test was in July 2014.
   D. PTCB – the results for the first semester of 2016 are not yet available.
4. **Operations**

A. **Credentials Division**

We completed the renewal cycle for pharmacist licenses as well as the pharmacy permits and CDS licenses for pharmacies on December 31.

- **PST:** We printed 8,657 renewal reminder notices, held 4 of them back for defaulted student loan issues, then mailed the reminder on October 31.
- **PHY:** We printed and mailed 1,989 renewal reminders on October 31.
- **CDS-PHY:** We printed and mailed 1,390 renewal reminders on October 31.

B. **Compliance Division**

Our 5 pharmacist compliance officers are responsible for inspecting all the pharmacies and other facilities holding controlled substances (CDS). The census reports available for this meeting reflect 1,466 pharmacies within the state, as well as approximately 900 various types of facilities for CDS visits, including hospitals, rural health clinics, animal control shelters, researchers, etc.

In addition to their routine site visits, the compliance officers are also responsible for investigating complaints filed with the Board. We began the fiscal year with 224 cases pending from the prior fiscal year. We have entered 219 new cases and closed 227, leaving 216 cases still open. Of the 227 cases closed this fiscal year, 52% were disposed of through staff activities and the balance through committee and Board action.

As we advised you at your last meeting, there was an insufficient response to our first listing for the new pharmacist compliance officer position. In addition, we determined it appropriate to shift the new territory further to the north. We re-posted the position availability notice at the end of the year. Of the 15 applications received, we selected four for interview, which we completed this past Friday.

C. **Administrative Division**

The Legislative Auditor has informed us of our selection for a performance audit. They will contact us shortly after February 1 for the initial conference.

Covalent Logic is the vendor for our website and contact management system. In early January 2017, they sent us a report with some statistical information showing a variety of parameters, including number of users, sessions, page views, session duration, etc. A copy of the report was posted in the Boardroom Library.

5. **State Activities**

A. **La. Dept. of Health – Bureau of Health Services Finances**

This agency published its *Final Rule* in the November 2016 edition of the *Louisiana Register*; it is a comprehensive re-promulgation of the rules relative to licensing standards for nursing facilities in the state. Among the standards for pharmaceutical services, there are sections for emergency drug kits, labeling of medications, medication administration, disposition of drugs no longer needed, and record keeping requirements.

Within the January 2017 edition of the state register, this agency published several Final Rules, dealing with licensing standards for several different types of facilities, including Forensic Supervised Transitional Residential and Aftercare Facilities and Pediatric Day Health Care Facilities.

B. **La. Board of Drug & Device Distributors**

This board published a *Final Rule* in the December 2016 edition of the *Louisiana Register*, making several amendments to their rules. Of note, they amended their definition of the term ‘distribution’ to exclude several activities, including:

1. the distribution of drugs or devices among hospitals or other health care entities among common ownership;
2. the distribution of drugs or devices for emergency medical reasons, including transfer by a retail pharmacy to another retail pharmacy to alleviate a temporary shortage arising from delays or interruptions of regular distribution schedules or public health emergency declarations;
3. the distribution of legend drugs by retail pharmacies to licensed practitioners for office
use where the annual dollar volume of legend drugs sold to licensed practitioners does not exceed five percent of the dollar volume of that retail pharmacy’s annual legend drug sales; or
(4) the distribution of drug or device samples by manufacturer’s or distributor’s representatives.

The Final Rule also amended other sections of their rules, including the application process for various credentials, qualifications of certain personnel in licensed distributors, and recordkeeping requirements for distributors. Among the credentials established is a new category for third-party logistics distributors, a new entity recognized in the recent federal legislation known as DQSA (Drug Quality & Security Act).

Due to citation errors, the Louisiana Register re-promulgated the Final Rule that had originally appeared in the December 2016 edition of the register; the re-promulgation was printed in the January 2017 edition of the Louisiana Register.

C.  La. State Board of Medical Examiners

The board published a Final Rule in the December 2016 edition of the Louisiana Register which amended their long-standing rule governing the use of medications in the treatment of obesity. In particular, the amendment indicates that when a non-controlled substance has been approved for the treatment of obesity, the restrictions in that rule shall not prevent the individual components of that drug from being prescribed by the physician.

This board also published a Final Rule in the same edition of the state register, amending the scope of practice for podiatrists. The amendment does not alter their current prescriptive authority.

D.  La. State Radiologic Technology Board of Examiners

This board published a Final Rule in the December 2016 edition of the Louisiana Register, relative to certain portions of their rules concerning the licensure and disciplinary process, as well as certain continuing education requirements. Nothing therein impacts their current authority relative to medication administration.

E.  La. Board of Pharmacy

We published the Final Rule for Pharmacist-in-Charge of Nonresident Pharmacies in the January 2017 edition of the Louisiana Register; it was effective immediately. In that same edition, we published the Notices of Intent for four regulatory projects, including (1) Marijuana Pharmacy, (2) Pharmacy Technicians, (3) Reinstatement of CDS Licenses, and (4) Standing Orders for Distribution of Naloxone.

6.  Regional & National Activities

A.  National Association of Boards of Pharmacy (NABP)

The annual meeting of this association is one of the three meetings for which certain of your travel expenses are eligible for reimbursement, subject to the limitations itemized in the Board’s travel policy as well as the state’s travel policy in PPM-49. For your planning purposes, the 2017 meeting will be held May 20-23 at the Hyatt Regency Hotel in Orlando, FL.

During the meeting, an election will be conducted to fill several open positions on the NABP Executive Committee. The open positions and candidates are listed here:

- President-Elect: Susan Ksiazek (NY)
- Treasurer: Jack “Jay” Campbell (NC)
- District 3: LeeAnn Bundrick (SC) and Reginald “Reggie” Dilliard (TN)
- District 4: Philip Burgess (IL)
- District 6: Gay Dodson (TX) and Douglas Lang (MO)
- District 8: Richard Mazzoni (NM)

Some of the candidates may distribute letters of introduction and interest to the member boards prior to the meeting. When we receive those prior to a Board meeting, we post them in the Boardroom Library for your review.

During the meeting, a number of resolutions concerning different pharmacy
regulatory issues will be considered. We anticipate receiving draft copies of those resolutions prior to the conference, and we will post those in the Boardroom Library in time for your May 10 Board meeting, which will occur just prior to the May 20-23 conference in Orlando.

B. **NABP-AACP District 6**

The annual meeting of this association is one of the three meetings for which certain of your travel expenses are eligible for reimbursement, subject to the limitations itemized in the Board’s travel policy as well as the state’s travel policy in PPM-49. For your planning purposes, the 2017 meeting will be held October 8-11 at the Marriott Riverwalk Hotel in San Antonio, TX.

The meeting planners are developing the program; when the program is ready, we will release the agenda and conference registration form. Before that, however, we anticipate releasing the link to the hotel reservation website before the end of January.

C. **MALTAGON**

The annual meeting of this association is one of the three meetings for which certain of your travel expenses are eligible for reimbursement, subject to the limitations itemized in the Board’s travel policy as well as the state’s travel policy in PPM-49. For your planning purposes, the 2017 conference will be held in Charleston, SC on October 22-25.

The meeting planners are developing the program and making arrangements for the conference venue. When those registration materials are available, we will forward them to you.

7. **International Activities**

A. **International Pharmaceutical Federation (FIP)**

FIP will convene its 77th World Congress of Pharmacy and Pharmaceutical Sciences on Sep. 10-14, 2017 in Seoul, South Korea. The theme for the conference selected by the host, Korean Pharmaceutical Association, is *Medicines and beyond! – the soul of pharmacy*. Presentations will center on the five main topics selected for the conference: (1) Nurturing the soul of pharmacy, (2) Precision pharmacotherapy, (3) Pharmacy services; going beyond prescriptions, (4) Smart pharmacy, and (5) Targeting special interests.

FIP has just opened the registration portal for both the conference and housing options, at [www.fip.org](http://www.fip.org). The conference registration fee is slated to increase on May 15 and then again on August 15.

For your planning purposes, the 2018 congress will be held Sep. 2-6 in Glasgow, Scotland.

B. **.Pharmacy**

. Pharmacy is a generic top level domain (gTLD) on the Internet. Although it is owned by NABP, the application to ICANN for the .Pharmacy domain was endorsed by several international organizations, including the World Health Organization (WHO), Interpol, the Pharmaceutical Group of the European Union (PGEU), the International Pharmaceutical Federation (FIP), and the National Association of Pharmacy Regulatory Authorities (NAPRA). .Pharmacy is different from most TLDs in that access to a website on .Pharmacy is restricted to applicants whose legitimacy has been verified by NABP or one of its international partners. The vision for .Pharmacy is to create an online pharmacy community where patients can go to order prescription drugs, knowing the sites have already been verified as legitimate pharmacies, licensed by the appropriate pharmacy regulatory authority. In addition to pharmacies, the plan is to create a presence for a number of related organizations, including professional membership organizations, colleges of pharmacy, boards of pharmacy, drug manufacturers, and consumer-oriented drug information organizations. .Pharmacy began accepting applications for website registrations in June 2015.

By the end of December 2016, there were 262 organizations with registered domains, 193 of which were held by pharmacies, including some chains like CVS and
Rite Aid. More information, including a list of registered domains, is available at www.safe.pharmacy.

Respectfully submitted,
Malcolm J Broussard
Executive Director
Compliance Division Census Report

January 25, 2017

**Practitioner Recovery Program**
- Probation Completion Report
  
  *(none since last Board meeting)*

- Active Probation 46  
  - Pharmacist
  - 1 Pharmacy intern
  - 2 Technician

- Active Suspension 40  
  - Pharmacist
  - 2 Pharmacy intern
  - 16 Technician
  - 4 Technician candidate

**Disciplinary Restrictions**
- Probation Completion Report

  01-08-2017  PHY.006141  Custom Meds, Inc. d/b/a Custom Meds [Inverness, FL]

- Active Probation 15  
  - Pharmacist
  - 1 Pharmacy intern
  - 7 Technician
  - 6 Technician candidate
  - 5 Pharmacy permit
  - 2 CDS-PHY license
  - 1 DME permit

- Active Suspension 42  
  - Pharmacist
  - 1 Pharmacy intern
  - 66 Technician
  - 16 Technician candidate
  - 13 Pharmacy permit
  - 3 CDS-PHY license
  - 72 CDS license for practitioners
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### Louisiana Board of Pharmacy

#### Census Report

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#### Notes
- Type of Credential: Pharmacists, Pharmacy Interns, Pharmacy Technicians, Pharmacy Technician Candidates
- Type of Permit: IR, RC, H, IN, NU, CH, PEN, OS, PE, CO
- Special Activity: CDTM, MAR
- Equipment Permits: AMS, EDK, DME

#### Key Figures
- Pharmacists: In-state 4,522, Out-of-state 1,975, TOTAL 6,497
- Pharmacy Interns: In-state 1,389, Out-of-state 152, TOTAL 1,541
- Pharmacy Technicians: In-state 4,567, Out-of-state 152, TOTAL 4,719
- Pharmacy Technician Candidates: In-state 1,389, Out-of-state 32, TOTAL 1,421
- Equipment Permits: AMS 0, EDK 466, TOTAL 2,896
- Equipment Permits: AMS 0, EDK 466, TOTAL 2,896

#### Additional Information
- Type of Permit: IR, RC, H, IN, NU, CH, PEN, OS, PE, CO
- Special Activity: CDTM, MAR
- Equipment Permits: AMS 0, EDK 466, TOTAL 2,896
- Equipment Permits: AMS 0, EDK 466, TOTAL 2,896

#### Summary
- The report provides data on the number of pharmacists, pharmacy interns, pharmacy technicians, and pharmacy technician candidates from 1996 to 2017.
- The data includes information on in-state and out-of-state figures, with totals presented for each year.
- The report also includes data on equipment permits and special activity permits.
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#### October 1, 2016 - December 31, 2016

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**Subtotal**: 1050

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**Subtotal**: 256

**TOTAL**: 1393

**Subtotal**: 1294

**Subtotal**: 1022

**Subtotal**: 1001

**Subtotal**: 1213
January 25, 2017

Agenda Item 11-L: Report of Executive Director

Section 2.C – Exceptions Report

1. PIC at Multiple Pharmacies

   Board Policy I.A.4 permits the Executive Director to approve requests from pharmacists wishing to serve as the Pharmacist-in-Charge (PIC) of more than one pharmacy at the same time. The policy requires the concurrence of the President, as well as notice to the Board at its next meeting. As authorized by the President, the Executive Director has delegated this authority to the General Counsel and the Assistant Executive Director.
   - On January 4, 2017, Mr. Aron and Mr. Fontenot concurred to grant a request from Robin H. Braud (PST.013668) for dual PIC privileges at St. Vincent dePaul TriParish Community Pharmacy in Houma (PHY.004673-CH) and Medicine Shoppe of Morgan City (PHY.002661-IR).

2. Special Work Permits for military-trained applicants and their spouses

   LAC Title 46: LIII §904 authorizes the Board to provide preferential licensing procedures for military-trained applicants and their spouses. As authorized by the President, the Executive Director has delegated this authority to the General Counsel and the Assistant Executive Director.
   - (None since last report.)

3. Special Work Permits

   Board Policy I.A.7 permits the Executive Director to issue Special Work Permits to document the resurrection of expired non-renewable credentials and for other purposes as authorized by the Board. The policy requires the concurrence of the President, as well as notice to the Board at its next meeting. As authorized by the President, the Executive Director has delegated this authority to the General Counsel and the Assistant Executive Director.
   - On November 28, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Shirley Ann Cohen. She had previously obtained PTC.002892 which expired on August 16, 2005. She is PTCB-certified and was issued a Special Work Permit for one year to earn 600 hours of practical experience.
   - On November 28, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Nakesha Nicole Onezime. She had previously obtained PTC.020941 which expired on August 4, 2015. Should she pass the PTCB examination by May 1, 2017, she is authorized to receive a Special Work Permit for one year to earn 600 hours of practical experience.
   - On November 29, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Shaila Michelle Babineaux. She had previously obtained PTC.010862 which expired on April 18, 2013. Should she pass the PTCB examination by May 1, 2017, she is authorized to receive a Special Work Permit for one year to earn 600 hours of practical experience.
   - On December 1, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Kimberly Anne Clark. She had previously obtained PTC.021900 which expired on March 30, 2016. Should she pass the PTCB examination by June 1, 2017, she is authorized to receive a Special Work Permit for one year to earn 600 hours of practical experience.
   - On December 5, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Samantha Gayle Jones. She had previously obtained PTC.020374 which expired on August 20, 2005. She is PTCB-certified and was issued a Special Work Permit for one
year to earn 600 hours of practical experience.

- On December 21, 2016, Mr. Aron and Mr. Finalet concurred to grant a request from Janisha Lenae Musco. She had previously obtained PTC.010851 which expired on September 16, 2007. She is PTCB-certified and was issued a Special Work Permit for one year to earn 600 hours of practical experience.

- On January 9, 2017, Mr. Aron and Mr. Finalet concurred to grant a request from Muhammad Ibn Gham. She had previously obtained PTC.019424 which expired on May 5, 2014. He is PTCB-certified and was issued a Special Work Permit for one year to earn 600 hours of practical experience.

- On January 16, 2017, Mr. Aron and Mr. Finalet concurred to grant a request from Diamond Porche’ Fleming. She had previously obtained PTC.020445 which expired on March 3, 2014. She is PTCB-certified and was issued a Special Work Permit for one year to earn 600 hours of practical experience.

- On January 16, 2017, Mr. Aron and Mr. Finalet concurred to grant a request from Jalaysia Patrice Anderson. She had previously obtained PTC.016691 which expired on February 17, 2012. She is PTCB-certified and was issued a Special Work Permit for one year to earn 600 hours of practical experience.
Dear Malcolm:

Thank you for choosing Covalent Logic as your business partner. We are so pleased you trust us with your website, as well as online identity. Your business is much appreciated, and we will honor your commitment as we continue to meet your communication needs.

You are a vital part of our success and growth. And for that, we are most grateful.

Hosting services at Covalent Logic include more than keeping your site live. You also receive the benefit of our team’s experience and knowledge for troubleshooting, tech support, advice and consultation. Additionally, your site is monitored by Google Analytics and you have access to these reports live. If you are unaware of how to access them or just want more expert information on how to use them, I’d be happy to give you a tutorial and teach you more.

As a gift for the year end, I’ve put together a 2016 report on your website’s traffic, user demographics and most popular content. Included in this data are:

- Cumulative numbers of unique users (visitors), sessions (site visits) and pageviews. The arrow compares the number to 2015.

- The average session duration shows how "sticky" your content is, how much people read and interact with it. Between thirty seconds and two minutes is average. A simple site should score on the low end, with more complex sites on the higher end.

- The Session trend graph demonstrates your traffic by month, with a trendline illustrating the average. Trendline going up means more people are coming to your site each month, with a parallel trendline meaning you are not attracting new visitors to your site.

- Age & gender can offer a look at the demographics of your site. Keep in mind that website usage in general is 55% women and people under 18 are not tracked by Google due to their caution around the Children’s Online Privacy Protection Act.

- Channels driving engagement focusing on a comparison between page views (how much content visitors are reading) and the referrer that brought them into the site. Organic search means they came through google without a paid ad placement, while direct means they typed your address directly into the address bar. Keep in mind that many people erroneously type web addresses into
Google's search, but Google counts that as a direct channel. Referral means another website linked you that isn't considered one of the major social channels: Facebook, Twitter, LinkedIn, Instagram or Pinterest. Email means they clicked in an email.

- The top pages is ranked by the number of sessions with a visit to the page, not by unique visitors.
- The traffic pie shows where your site visitors come from.
- Returning vs. New Visitors is a good picture of the ratio between new people you are attracting through PR, SEO, Content Marketing & Advertising versus the people who visit your site on a regular basis.
- In-Market segment and affinity top ten lists show you the things your site visitors are doing when they are not on your website.
- Browser choice, mobile & service provider show the devices and networks your visitors use. Keep in mind average 65% of web traffic is now served over a mobile device meaning your site's responsiveness is essential in your site's success.
- The city offers a geographic picture of your reach.

If there are other analytics you'd like us to look into, just ask. We are here to be your host and your consultant. I'm happy to offer advice for how to better use the tools you have or enhance them with new design and additional features. Mostly, we're here to answer questions you have about best practices and how to make the most of your investment.

As always, we are here to support you. Please feel free to reach out to me, Alex Sevier or Trae Russell for more information, advice and consultation throughout the year.

Regards,

Starr Wood
Founder
Your Visitors Are Shopping For...
Your site visitors are in the market for these:

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<td>1. Travel/Hotels &amp; Accommodations</td>
<td>3,856</td>
</tr>
<tr>
<td>2. Gifts &amp; Occasions/Gift Baskets</td>
<td>3,472</td>
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<tr>
<td>3. Consumer Electronics/Cameras</td>
<td>3,252</td>
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<tr>
<td>4. Autos &amp; Vehicles/Auto Parts &amp; Accessories/...</td>
<td>2,879</td>
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<tr>
<td>5. Real Estate/Residential Properties/Residenti...</td>
<td>2,837</td>
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<tr>
<td>6. Real Estate/Residential Properties/Residenti...</td>
<td>2,747</td>
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<tr>
<td>7. Gifts &amp; Occasions/Holiday &amp; Seasonal Items</td>
<td>2,636</td>
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<tr>
<td>8. Apparel &amp; Accessories/Women's Apparel</td>
<td>2,633</td>
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<tr>
<td>9. Employment</td>
<td>2,612</td>
</tr>
<tr>
<td>10. Home &amp; Garden/Home Furnishings</td>
<td>2,593</td>
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</tbody>
</table>

Your Visitors Spend Leisure Time...
Your site visitors spend their leisure and recreation time on this:

<table>
<thead>
<tr>
<th>Affinity Category (reach)</th>
<th>Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Technophiles</td>
<td>9,690</td>
</tr>
<tr>
<td>2. Shoppers/Shopaholics</td>
<td>9,462</td>
</tr>
<tr>
<td>3. Movie Lovers</td>
<td>8,941</td>
</tr>
<tr>
<td>4. TV Lovers</td>
<td>8,008</td>
</tr>
<tr>
<td>5. Shutterbugs</td>
<td>7,413</td>
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<tr>
<td>6. Home Decor Enthusiasts</td>
<td>7,234</td>
</tr>
<tr>
<td>7. News Junkies/Entertainment &amp; Celebrity...</td>
<td>7,076</td>
</tr>
<tr>
<td>8. Travel Buffs</td>
<td>6,706</td>
</tr>
<tr>
<td>9. News Junkies/Political News Junkies</td>
<td>5,948</td>
</tr>
<tr>
<td>10. Cooking Enthusiasts/Aspiring Chefs</td>
<td>5,775</td>
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</table>

City Sessions

<table>
<thead>
<tr>
<th>City</th>
<th>Sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Baton Rouge</td>
<td>2,130</td>
</tr>
<tr>
<td>2. New Orleans</td>
<td>2,034</td>
</tr>
<tr>
<td>3. Dallas</td>
<td>1,995</td>
</tr>
<tr>
<td>4. Shreveport</td>
<td>1,151</td>
</tr>
<tr>
<td>5. Lafayette</td>
<td>1,038</td>
</tr>
<tr>
<td>6. Bentonville</td>
<td>876</td>
</tr>
<tr>
<td>7. Houston</td>
<td>851</td>
</tr>
<tr>
<td>8. Metairie</td>
<td>810</td>
</tr>
<tr>
<td>9. Jefferson</td>
<td>766</td>
</tr>
<tr>
<td>10. Northbrook</td>
<td>749</td>
</tr>
</tbody>
</table>

Mobile... Mobile Dev... Users

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Apple</td>
<td>iPhone</td>
<td>2,545</td>
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<tr>
<td>2. Apple</td>
<td>iPad</td>
<td>2,320</td>
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</tr>
<tr>
<td>3. (not set)</td>
<td>(not set)</td>
<td>2,033</td>
<td></td>
</tr>
<tr>
<td>4. Microsoft</td>
<td>Xbox One</td>
<td>1,137</td>
<td></td>
</tr>
<tr>
<td>5. Samsung</td>
<td>SM-G920A</td>
<td>7,350</td>
<td></td>
</tr>
<tr>
<td>6. Samsung</td>
<td>SM-G930V</td>
<td>7,350</td>
<td></td>
</tr>
<tr>
<td>7. Samsung</td>
<td>SM-G900A</td>
<td>7,350</td>
<td></td>
</tr>
<tr>
<td>8. Samsung</td>
<td>SM-G920V</td>
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<td></td>
</tr>
<tr>
<td>9. Samsung</td>
<td>SM-G930A</td>
<td>7,350</td>
<td></td>
</tr>
<tr>
<td>10. Samsung</td>
<td>SM-N920A</td>
<td>7,350</td>
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Service Provider Users

<table>
<thead>
<tr>
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<th>Users</th>
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</thead>
<tbody>
<tr>
<td>1. (not set)</td>
<td>3,864</td>
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<tr>
<td>2. cox communications</td>
<td>1,806</td>
</tr>
<tr>
<td>3. charter communications</td>
<td>864</td>
</tr>
<tr>
<td>4. cox communications inc.</td>
<td>854</td>
</tr>
<tr>
<td>5. at&amp;t mobility llc</td>
<td>815</td>
</tr>
<tr>
<td>6. suddenlink communications</td>
<td>776</td>
</tr>
<tr>
<td>7. at&amp;t internet services</td>
<td>764</td>
</tr>
<tr>
<td>8. walgreens</td>
<td>615</td>
</tr>
<tr>
<td>9. walmart stores inc.</td>
<td>588</td>
</tr>
<tr>
<td>10. ochsner clinic foundation</td>
<td>580</td>
</tr>
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</table>
December 20, 2017

Dear Board Members,

My name is Richard Mazzoni and I am a candidate for re-election to the District 8 position on the NABP Executive Committee. As you know, the election will be held at the Annual Meeting in Orlando this May.

I am currently a member and chairman of the New Mexico Board of Pharmacy, and have also served in the past on the California Board of Pharmacy, including one term as president of that Board.

I retired from a 25-year career at a major pharmacy company, where I was employed in Pharmacy Operations, Professional Services, Government Affairs, and finally in Regulatory Compliance. During my tenure, I had the privilege of working with many of you. I currently operate a consulting business providing regulatory guidance to select clients.

The practice of pharmacy is rapidly changing and evolving, along with our entire healthcare delivery system. Practice settings, technologies, and modalities exist today that we couldn’t even have imagined as recently as last year. Federal agencies are inserting themselves into pharmacy practice in unprecedented fashion. Boards of Pharmacy are challenged with keeping up with these changes.

Regulating appropriately to protect the safety of our citizens, while not impeding genuine progress is a major current challenge. NABP serves a vital purpose in providing insight, services and coordination to the member Boards.

If re-elected, I pledged to serve NABP and your Board with energy and integrity. I respectfully ask for your vote at the upcoming Annual Meeting. Thank you for your consideration.

Warm regards,

Richard Mazzoni, R.Ph.
Special Presentation

Ms. Diane Milano
Announcements
**Agenda Item 13: Announcements**

<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb. 7</td>
<td>Marijuana Project Team Meeting</td>
</tr>
<tr>
<td>Feb. 15-16</td>
<td>Pharmacy Technician Stakeholder Consensus Conference</td>
</tr>
<tr>
<td>Feb. 20</td>
<td>La. Commission for Prevention of Opioid Abuse</td>
</tr>
<tr>
<td>Feb. 28</td>
<td>Mardi Gras Day – <em>Board office closed</em></td>
</tr>
<tr>
<td>Mar. 1</td>
<td>Public Hearing (Pharmacy Technicians, Naloxone, CDS License)</td>
</tr>
<tr>
<td>Mar. 2</td>
<td>Public Hearing (Marijuana)</td>
</tr>
<tr>
<td>Mar. 8-9</td>
<td>Violations Committee – Preliminary Hearing</td>
</tr>
<tr>
<td>Mar. 14</td>
<td>Board Meeting</td>
</tr>
<tr>
<td>Mar. 24-27</td>
<td>APhA Annual Meeting – San Francisco, CA</td>
</tr>
<tr>
<td>Apr. 10</td>
<td>2017 Legislature Regular Session convenes</td>
</tr>
<tr>
<td>Apr. 11-12</td>
<td>TALKOM Conference – Oklahoma City, OK</td>
</tr>
<tr>
<td>Apr. 12</td>
<td>Louisiana Pharmacy Congress</td>
</tr>
<tr>
<td></td>
<td>Prescription Monitoring Program Advisory Council</td>
</tr>
<tr>
<td>Apr. 14</td>
<td>Good Friday – <em>Board office closed</em></td>
</tr>
<tr>
<td>May 9</td>
<td>Reinstatement, Impairment, &amp; Executive Committees</td>
</tr>
<tr>
<td>May 10</td>
<td>Reciprocity Committee</td>
</tr>
<tr>
<td></td>
<td>Board Meeting</td>
</tr>
<tr>
<td>May 11</td>
<td>Administrative Hearing</td>
</tr>
<tr>
<td>May 20-23</td>
<td>NABP Annual Meeting – Orlando, FL</td>
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<tr>
<td>May 25-27</td>
<td>LSHP Annual Meeting – New Orleans, LA</td>
</tr>
<tr>
<td>May 29</td>
<td>Memorial Day – <em>Board office closed</em></td>
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