

BOARD OF PHARMACY
Secretary of State, Office of Professional Regulation
National Life Building, North, Floor 2, Montpelier, VT 05620-3402
UNAPPROVED MINUTES
Meeting of August 27, 2008

1. The meeting was called to order at 9:03 AM.

Members present: Earl W. Pease, Pharm.D., Chairman; Steven M. Vincent, R.Ph., Vice-Chair; Julie A. Eaton, R.Ph.; Larry Labor, R.Ph.; Jeffrey P. Firlik, R.Ph. and Ann Overton. Absent: Emma J. Pudvah, Secretary.

OPR Personnel: Larry S. Novins, Board Counsel; Carla Preston, Unit Administrator; Daniel Vincent, Inspector; Gregg Meyer, State Prosecuting Attorney; and Christopher Winters, Director.

Others present: Anthony Otis, Esq.; Hunt Blair; Marc Comtois; Kevin Kelley; and Jennifer Browe.

The Board welcomed Gregg Meyer, one of the State Prosecuting Attorneys for the Office. Mr. Meyer replaces Robert Backus who recently moved out of state.

2. The Chair called for approval of the Minutes of the July 23rd meeting. Ms. Eaton made a motion, seconded by Ms. Overton, to approve the Minutes of the July 23, 2008 meeting as submitted. Motion passed unanimously.

3. **Guests:**

- A. Amy Carlson, Chief Investigator, attended the meeting to discuss the prescription drug abuse workgroup hosted by the Vermont Department of Health as part of its public awareness campaign. She was asking for a member of the Board to join the workgroup. Attendees at the workshop include representatives from various health care and regulatory agencies, including law enforcement. The meeting is scheduled every other month for a couple of hours. She said the Department of Health and the Vermont State Police (Public Safety) are working together to educate the public and offer assistance regarding abuse of prescription drugs. She advised that the current rate in Vermont is one death per week from prescription overdose. The sources of the drugs are relatives' medicine cabinets, pharmacies, doctor shopping and the Internet. Ms. Carlson said the Department of Health is distributing information to the public regarding what to do and how to handle leftover prescription drugs when a family member dies.

Dan Vincents said that one target group is persons with prescriptions for chronic pain due to the large volumes of drugs in patients' homes. Another area of concern is hospice patients. He noted that perhaps prescription should include the best way to destroy the drugs when no longer needed.

Ms. Carlson said they have been participating in the workgroup and would like to have a member of the Board of Pharmacy also participate. The statutory authority to prosecute persons for doctor shopping exists and persons have been charged criminally for doctor shopping. Ms. Carlson said the next workshop is scheduled around November. She will notify the Board when she receives the exact date and ask that the Board be included on the mailing list. She said training is being offered throughout ground rounds at various hospitals in Vermont. The training is to begin in the fall of 2008.

The Board acknowledged that it needs to reach retail pharmacists about the training which could be accomplished through advertising, the Vermont Pharmacists' Association, etc. The Board is aware of the end of life issues regarding the amount of prescription drugs that might remain in patients' homes. Members of the Board will make efforts to attend these meetings or workshops.

3. **Guests** - continued

- B. Christopher Winters, the Director of OPR, attended the meeting at the Board's request to discuss its need for an executive director. Mr. Winters noted that during the last legislative session, a provision for the authority to hire an executive director was added. He briefly mentioned budgetary concerns in the current climate.
- The Board is required to regulate and implement many issues concerning drugs, prescriptions, dispensing and their uses. Members of the Board mentioned many instances in which an executive director could assist in its activities. Members are involved in the development of examinations, rule making and legislative changes, participation on other committees or groups, in addition to responding to many questions from the public and practitioners. These additional duties are added to their regular responsibilities as working pharmacists. Members gave examples in which matters would have been better handled by an executive director. Many times even others which could be easily and much more effectively answered by an executive director versus waiting for a Board meeting. Several legislative mandates were mentioned for which the Board is responsible. Considerable time is spent on these and other issues. Currently, no state agency employs a pharmacist. An executive director who is a pharmacist could also assist other agencies, (i.e., VDH), and attend national meetings and bring back that information to the Board. Many questions are brought to the Board which could be answered by an executive director. It would also be beneficial to the disciplinary process. The prosecutor would have the expertise available and members of the board would not have to refuse from serving on the hearing panel to consider stipulations or hearings. The Board noted that Vermont is the only board that does not currently have an executive director. Not all executive directors are pharmacists but most have full-time staff persons.
- The Board indicated that with changes in technology, the practice of pharmacy is much more complex than in the past. Mail order, Internet prescribing and other electronic prescribing and dispensing abilities change frequently. In addition, the clinical role of the pharmacist is much more prevalent than in the past. Members noted that other states have full-time staff and a designated executive director. The Board is very concerned that important matters are not always dealt with timely or as effectively as they could be with an executive director, particularly one who is a pharmacist. The Board believes that a dedicated executive director would make the Board more pro-active and better serve the public. The Board sees an executive director as benefiting the public, practitioners, other agencies, the Office of Professional Regulation, as well as the profession, particularly those with prescribing authority. The Board noted that although preferred, the position would not have to be filled by a pharmacist. The Board indicated that with proper staffing much more could be done to promote medication safety.
- Mr. Novin said the Board has composed a list of legislative and other mandates for which it has oversight or has been asked to participate. Pharmacists members of the Board are asked to participate in many other groups, committees, meetings, etc. on important issues where their input as a pharmacist would be very beneficial but they cannot always donate their time.
- Mr. Winters acknowledged that the Office and many other organizations rely heavily on the Board for its expertise. He noted that it may be possible to contract the position or try to request a full-time position. He said they would need to lay out a case for the need for the position if needed for public protection. He said they would need to lay out a case for the need of State, Deputy, and business managers to move forward. He agreed to work with the Board, staff and with the Secretary after the go-lived date of the new licensing system in October.
- The Board thanked Director Winters for his time and appreciated his understanding and importance of its request for an executive director position.

3. **Guests** - continued

C. Hunt Blair, Director, VT Network Service Project Coordinator, with the Bi-State Primary Care Association (BSPCA), Marc Comtois with Maxor, Kevin Kelley with Community Pharmacy LLC, and Jennifer Browe, Pharmacist, attended the meeting to discuss their central fill site and telepharmacy pilot project. They indicated that they would like approval for the central fill pharmacy and for the proposed three remote sites mentioned in the pilot project, Plainfield, Hardwick, and Stowe.

The applicant has submitted an application for a drug outlet for the central fill site in Colchester, Pharmacy Network LLC d/b/a/ **Community Health Pharmacy**. The Board was provided with copies of the plan for the proposed pilot project for three locations. Phase I includes the Health Center in Plainfield with a proposed November 1, 2008 go live date, Phase 2 includes Northern Counties Health Care in Hardwick with a proposed go live date of December 1, 2008 and Phase III includes Lamoille Community Health Services, in Stowe with a proposed go live date of December 15, 2008.

The initial inspection of the Colchester pharmacy was conducted on August 26th and a Temporary License was issued. It is tentatively scheduled to open on or about the first of October. The applicants stated that prescriptions would not be mailed from the remote sites, only from the Colchester central fill site. Dispensing from the automated dispensing units would be directly to a patient at the remote sites. The applicants said the machines (ADU) are stocked with 120 of the most commonly prescribed drugs (acute or chronic conditions) determined for that federally qualified health center. They provided an overview of the process noting that counseling would be offered through video for new prescriptions which are flagged. They indicated that it is very safe and secure via barcoding, double scanning, and verified prepacking. The possibility of errors would be significantly reduced. The use of drug samples will be much less and likely to be eliminated.

The applicants anticipated approximately 250 to 300 prescriptions per day initially through the central fill pharmacy in Colchester. They expect it to increase within a few months to 500 to 600 per day. The applicants agreed to begin with Phase I and report back to the Board before proceeding with the other phases.

Steve Vincent agreed to serve as the point person for the applicants. The applicants agreed to provide updates which would be distributed to members. The applicants were reminded that the statutory authority for the pilot project was designed for underserved areas of Vermont.

Mr. Vincent made a motion to approve Phase I (Plainfield) and to require a status report before considering other phases of the proposal. The motion was seconded by Ms. Eaton. A monthly progress report via letter to the Office would be required. The Board agreed that a follow-up status report within 90 days of commencement would also be required. The report should include at a minimum, the number of prescriptions filled, number of errors reported, and the number of persons requesting counseling via video link. The question was called and the motion passed.

The applicants said they plan to attend the Board's December meeting to request permission for phase II in Hardwick. They volunteered to assist with the legislative report due in December. They also agreed to participate in rule making based on their findings.

The Board advised the applicants that separate applications would be required for the central fill site and for each site of the automated dispensing unit. The remote locations would require an inspection and be issued separate licenses. However, only one designated pharmacist manager would be required but would be responsible for the central fill site as well as any and all remote locations.

3. **Guests** - continued

It was unclear whether each remote site would need a separate Drug Enforcement Administration number or if the central fill site would be sufficient. The applicants will contact the DEA for clarification. The Board noted that the purposes differed from the original intent of the pilot project and the 340B project. The rules created a result could differ as well.

- C. Anthony Otis attended the meeting to update the Board regarding legislation that may impact the practice of pharmacy. The focus of the discussion pertained to prescribing and the noticeable increase in errors.
- The Board indicated that part of the cause regarding the error increase was due to prescribers' lack of familiarity with the software. Members noted that there were many increases in errors during the first three or four months. The systems all have different formats. The Board believed that perhaps the National Association of Boards of Pharmacy could assist with standardizing the format which would reduce errors and benefit everyone. The pharmacist members of the Board noted that they have spent considerable extra time dealing with their errors as a result of prescribing.
- Mr. Otis noted that CMS will implement a financial incentive for those who do not prescribe. He said it is causing delays because pharmacists have to follow-up with the prescriber more often. He mentioned legislation he is currently tracking and will keep the Board apprised of its progress. He agreed to share his report with staff to be forwarded to members.

4. **Hearings/Stipulations et al.**

5. **Follow-Up Cases :**

6. **Reports:**

Inspector Daniel Vincent asked a few questions pertaining to recent inspections. He noted that in the near future he would have the capability to conduct an inspection and note the results electronically via a laptop. A copy of the inspection report could then be emailed to the pharmacy and/or its manager.

7. **Legislation/Rulemaking:**

The Board continued its review of proposed changes to the rules. The changes discussed will be made and the latest version will be posted on the Board's Website. Interested persons will be invited to either submit written comments about the proposed rules or to attend the next Board meeting for comment.

8. **COMPLAINTS :**

9. **Applications for Licensure as a Pharmacist :**

Mr. Firlik made a motion, seconded by Ms. Eaton, to approve the following applicants for licensure as pharmacists. Motion passed unanimously.

Gretchen L. Brummel (Endorsement)
Vishwamohan Diaranipathi (Examination)
Joellen Holcombe (Endorsement)

Andrew Cote (Endorsement)
James F. Greenough, III (Examination)
Michael Paquette (Endorsement)

10. **Drug Outlets:**

The Board reviewed the following applications for drug outlets and took action as indicated.

- a. **Kinney Drugs Inc. #29**, (038-0002470) located at 308 Shelburne Road, Burlington, VT (formerly located at 789 Pine Street, Burlington), submitted a new application to reflect the change in location. An initial inspection was conducted on or about July 1, 2008 and a follow-up inspection was conducted on July 20th. Based on the favorable inspections, the Board approved this facility for full licensure.
- b. Pharmacy Network LLC d/b/a/ **Community Health Pharmacy**, 150 Brentwood Avenue, Colchester, VT submitted a new application for mail order. An initial inspection was conducted on August 26, 2008 and a Temporary License was issued. A second inspection is required once the drug outlet is open.
- c. JMS Pharmacy Management Inc. d/b/a/ **Castleton Health Center Pharmacy**, 275 Route 30 North, Bomoseen, VT submitted a new application. An initial inspection is required.

11. **Change in Pharmacist Manager:**

Ms. Eaton made a motion, seconded by Mr. Vincent, to approve the changes in pharmacist managers as indicated below for items a through e. Item f needs additional information. Motion passed unanimously.

- a. **Price Chopper Pharmacy #192**, (038-3328), located at 90 Center Road, Essex Jct., Vermont, changed pharmacist managers from Jennifer Browe to Matthew O'Connor.
- b. **Messenger Valley Pharmacy**, (038-3276), located at 170 Grafton Road, Townshend, Vermont, changed pharmacist managers from Gregory Deanto Joanne Ryan.
- c. **Hannaford Food & Drug #129**, (038-3339), located at 456 South Barre Road, Barre, Vermont, changed pharmacist managers from Cheryl Hackett to Alan McCampbell.
- d. **Kinney Drugs Inc. #94**, (038-3357), located at Route 5 Memorial Drive, Lyndonville, Vermont, changed pharmacist managers from Elaine Nicol-Cash to Margaret Morris.
- e. **Rite Aid Pharmacy #10337**, (038-3372), located at 412 Broad Street, Lyndonville, Vermont, changed pharmacist managers from Robert Charli to Elaine M. Nicol-Cashin.
- f. **Rite Aid Pharmacy #10317**, (038-3372), located at 158 Cherry Street, Burlington, Vermont, submitted an application for change in pharmacist manager from Yogesh Kumar Patel to Timothy Luneau. The Board found the application incomplete as signatures from the corporate officer were missing.

12. **Non-Resident Drug Outlets:**

Mr. Firlik made a motion, seconded by Ms. Eaton, to approve the following non-resident drug outlets. Motion passed unanimously.

- a. Publix Pharmacy #1134, Lakeland, FL
- b. NMHC Mail, Miramar, FL

13. **Wholesale Drug Outlets:**

The Board initially found the applications to be incomplete. Further review and discussion and/or submission of additional documentation completed the applications prior to the end of the meeting. Ms. Eaton made a motion, seconded by Mr. Vincent, to approve the following (non-resident) wholesale drug outlets based on their completed applications. Motion passed unanimously.

- a. Atlantic Biologicals Corp., 20101 NE 16th Place, Miami, FL.
- b. Atlantic Biologicals Corp., 312 Space Park North, Goodlettsville, TN.
- c. Atlantic Biologicals Corp., 1870 Prince Road #36, Tucson, AZ.
- d. Capital Wholesale Drug Co., 873 Williams Avenue, Columbus, OH.
- e. Health First Corporation, 2231 670th Avenue W, Mountlake Terrace, WA.

14. **Drug Outlet remodeling, changes in Officers/Directors, hours of operation, etc.:**

15. **Continuing Education Requests:**

16. **Intern/Preceptor application(s)**

Mr. Vincent made a motion, seconded by Mr. Firlik, to approve the following Applications as indicated. Motion passed unanimously.

- a. Carrie J. Fox—submitted an Application for Registration of Intern—Approved.
- b. Stephen J. Lyons—submitted an Application for Registration of Intern—Approved.
- c. Douglas J. Franzoni, —submitted Intern's Evaluation of Internship Period and Preceptor's Affidavit of Internship Hours and was approved for the 849.5 hours she earned during the period of June 9, 2007 through August 9, 2008 while working at Hannaford's Pharmacy in Williston, Vermont.
- d. Roshanak Mohaghegh—submitted Intern's Evaluation of Internship Period and Preceptor's Affidavit of Internship Hours and was approved for the 365 hours she earned during the period of May 25, 2008 through August 12, 2008 while working at Rite Aid Pharmacy #4272 in Burlington, Vermont.

17. **Pharmacy Technicians:** Total number of Active Registered Technicians is **1,323**.

18. **Newsletter Topics!**

19. **Miscellaneous Correspondence**

- a. The Board reviewed the August 26, 2008 Email from Gail Boundy concerning licensing requirements applicable to prescribing of laser surgery center located in Vermont. There was nothing stated in her email message that would require licensure as a pharmacy. She will be referred to the Board's Website for the statutes and rules.
- b. The Board reviewed the July 2008 information from Wolters Kluwer regarding Facts & Comparisons. The questionnaire was answered and returned to them.

20. **National Association of Boards of Pharmacy (NABP) Correspondence:**

- a. The Board reviewed and noted the Notice of State Newsletter Printing Costs Increases, dated August 22, 2008.

21. **Public Comment**

22. **Other Business Introduced**

23. The next meeting is scheduled for **Wednesday, September 24, 2008** at 9:00 AM. Future meetings for 2008 are scheduled as follows: October 22nd; and December 3rd.

24. There being no further business, the meeting was adjourned at 3:00 PM.

Respectfully submitted,

Carla Preston, Unit Administrator
Office of Professional Regulation