

Meeting Notice
Missouri Board of Pharmacy
April 9-10, 2014 (Wednesday and Thursday)

Courtyard By Marriott
3301 Lemone Industrial Blvd
Columbia, MO 65203

Notification of special needs as addressed by the Americans with Disabilities Act should be forwarded to the Missouri Board of Pharmacy, P O Box 625, 3605 Missouri Blvd., Jefferson City, Missouri 65102, or by calling (573) 751-0093 to ensure available accommodations. The text telephone for the hearing impaired is (800) 735-2966.

Except to the extent disclosure is otherwise required by law, the Missouri Board of Pharmacy is authorized to close meetings, records and votes, to the extent they relate to the following: Sections 610.021(1), (3), (5), (7), (13), and (14), RSMo, and Section 324.001.8 and .9, RSMo.

The Board may go into closed session at any time during the meeting. If the meeting is closed, the appropriate section will be announced to the public with the motion and vote recorded in open session minutes.

**OPEN SESSION – THE BOARD WILL GO IMMEDIATELY INTO CLOSED SESSION
FOR REMAINDER OF WEDNESDAY, APRIL 9, 2014**

- 1 **3:00 p.m.** Call to Order Pamela Marshall, R.Ph., President
- 2 Roll Call Pamela Marshall, R.Ph., President
- 3 3:01 p.m. The Board will go immediately into closed meeting pursuant to Section 610.021(1), (3), (5), (7), (13), and (14), and 324.001.8 and .9, RSMo. The Board will remain in closed until 8:30 a.m., Thursday, April 10, 2014.

OPEN SESSION
Thursday, April 10, 2014

- 4 8:30 a.m. Call to Order Pamela Marshall, R.Ph., President
- 5 1:00 p.m. 1st Case Kimberly Turner– Disciplinary Hearing

Note: The following items will be discussed as time allows during the open meeting. No specific date or time has been assigned to these items.

- 6 Agenda Additions/Corrections
- 7 Board Member/Staff Report

- 8 General Administration Report
 - January 2014 Financial Report
 - Rule Update
 - FDA Meeting Update
 - Agenda
 - Pharmacy Compounding Legislation and Implementation
 - Memorandum of Understanding With the States Under Section 503A
 - Webinar Updates
 - BNDD Regulatory Update (August 14th) [1.0 CE required]
 - Board Regulatory Update (Include in July “Lunch With The Chief”)
 - August Missouri Regulator Patient Safety Meeting
 - Sterile Compounding Training (N.C.)
 - Status of Board Rules
 - Joint Regulator Patient Safety Conference
 - HCCA- Certificate in Healthcare Compliance
 - FY13 Annual Report
 - Drug Distributor Licensing: Will the Board like to issue a pharmacy (Drug) distributor license?
 - 338.330
 - 338.333
 - ANNUAL RENEWALS: Would the Board be interested in an annual renewal or renewal based on birthdate for Missouri pharmacists/interns?
 - DRUG QUALITY & SECURITY ACT:
 - Discussion regarding regulation of an “outsourcing facility”? Should these be licensed/regulated by the Board? If yes, how (i.e.- should we establish a different license/compliance standards)?
 - Should we require separation of pharmacy & outsourcing activities?
 - Update on MOU requirements
 - Does the Board want to modify drug distributor rules to accommodate facilities distributing sterile compounding preparations intrastate?
 - According to the FDA, the DQSA applies to human drugs only and does not apply to vet drugs. Does the Board want to modify Missouri law to address drug distributors compounding veterinary drugs?
 - Does the Board want to disclose administrative letters of warning? [See Sec. 105]
 - STERILE COMPOUNDING:
 - Does the Board want to proceed with preliminary rule drafting?
 - Staff Recognitions
- 9 Applications for Intern Training Pharmacy Special Sites
- 10 Approval of STLCOP and UMKC Site/Preceptor Lists
- 11 DEA Hydrocodone Rescheduling Rule
- 12 2014 Legislative Update
- 13 Patient Safety Working Group Report

- 14 Mandatory Report of Pharmacist Discipline
- 15 July Strategic Goal Setting Proposals
- 16 Licensees Presently Under Discipline
- 17 Board Licensee Statistics
- 18 Pharmacist Provider Status Legislation
- 19 Closed meeting pursuant to Section 610.021(1), (3), (5), (7), (13), and (14), and 324.001.8 and .9, RSMo. The Board may go into closed session at some point during the remainder of the meeting, as determined necessary.

MISSOURI BOARD OF PHARMACY
REVISED-APRIL 9-10, 2014
OPEN TABLE OF CONTENTS

SECTION A - OPEN

- #A1 Agenda Additions/Corrections
- #A2 Board Member Report
- #A3A General Administration Report**

SECTION B - OPEN

Thursday, April 10, 2014
1:00 PM

- #B1 Kimberly Turner, #042688, #2011-001712

SECTION C -- OPEN

- #C1 Applications for Intern Training Pharmacy Special Site
- #C1A Applications for Intern Training Pharmacy Special Site**
- #C2 STLCOP and UMKC College of Pharmacy

SECTION D -- OPEN

- #D1 DEA Hydrocodone Rescheduling Rule
- #D2 2014 Legislative Update
- #D2A 2014 Legislative Update**
- #D3A Patient Safety Working Group Report**
- #D4A Mandatory Report of Pharmacist Discipline**
- #D5A July Strategic Goal Setting Proposals**

SECTION E -- OPEN

- #E1 Licensees Presently Under Discipline
- #E2 Board Licensee Statistics
- #E3 Pharmacist Provider Status Legislation

#A1 Agenda Additions/Corrections

#A2 Board Member Report

- DEA Conference,
- Center for Patient Safety Annual Meeting

#A3 General Administration Report

- January 2014 Financial Report

Pharmacy
FY 2014 YTD Financial Summary
As of January 31, 2014

	FY 2014 Actual	FY 2014 Projections	Remaining
Beginning Fund Balance	7,244,112.85		
Revenue	1,937,275.75	2,324,725.00	387,449.25
Board Expense and Equipment (includes Criminal History Checks)	167,020.97	667,448.00	500,427.03
Board Personal Service	515,594.14	947,067.00	431,472.86
Total Appropriation Costs	682,615.11	1,614,515.00	931,899.89
License System Costs	19,313.19	98,114.62	78,801.43
Board Fringe Benefits	199,666.34	463,021.00	263,354.66
Board - Expense & Equipment Transfer (i.e. computer equipment)	8,811.30	5,961.00	(2,850.30)
Board AG Transfers	3,659.41	70,309.62	66,959.83
Board AHC Transfer	7,855.85	20,313.50	12,457.65
Total All Other Transfer Costs	202,805.69	355,567.82	152,762.13
Total Transfer Costs	442,111.78	1,013,287.56	571,175.78
Total Appropriation Costs and Transfers	1,124,726.89	2,627,802.56	1,503,075.67
Ending Fund Balance	8,056,661.71		

YTD Attorney's Services	
Attorney General (by GR Transfer)	3,659.41
Law Offices of Tina M Crow	5,590.00
Newman, Comley and Ruth	41,007.90
Loretta Schouten	0.00
Curtis Thompson	20,410.69
	70,668.00

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
1	Pharmacy - 0637																
2	FY 2014 Monthly Fund Balance Sheet																
3		FY 2014 Actual												FY 2014 Projections			
4		July	August	September	October	November	December	January	February	March	April	May	June	Lapsed July	YTD Total	Projected	Remaining (Projected - YTD Total)
5	Beginning Fund Balance	7,244,112.85	7,172,038.58	7,482,694.84	8,143,521.21	8,379,782.90	8,312,993.15	8,180,532.27	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71			
6	Revenue	64,387.50	461,890.00	813,396.10	444,280.00	65,036.50	41,020.00	47,265.65	0.00	0.00	0.00	0.00	0.00	0.00	1,937,275.75	2,324,725.00	387,449.25
7	Start-up Loan Transfer - Lenders Revenue	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
8	Total Revenue	64,387.50	461,890.00	813,396.10	444,280.00	65,036.50	41,020.00	47,265.65	0.00	0.00	0.00	0.00	0.00	0.00	1,937,275.75	2,324,725.00	387,449.25
9	Total Funds Available	7,308,500.35	7,633,928.58	8,296,090.94	8,587,801.21	8,444,819.40	8,354,013.15	8,227,797.92	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	1,937,275.75	9,568,837.85	387,449.25
10																	
11	Appropriation Costs:																
12	Expense and Equipment	8,767.10	11,710.62	25,005.40	67,229.36	12,108.39	11,762.65	30,437.45	0.00	0.00	0.00	0.00	0.00	0.00	167,020.97	667,448.00	500,427.03
13	Personal Service and Per Diem	84,112.83	76,206.85	73,053.83	73,144.96	68,437.07	70,134.80	70,503.80	0.00	0.00	0.00	0.00	0.00	0.00	515,594.14	947,067.00	431,472.86
14	Total Appropriation Costs	92,879.93	87,917.47	98,059.23	140,374.32	80,545.46	81,897.45	100,941.25	0.00	0.00	0.00	0.00	0.00	0.00	682,615.11	1,614,515.00	931,899.89
15																	
16	Licensure System Cost	0.00	0.00	0.00	16,036.30	3,276.89	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	19,313.19	98,114.62	78,801.43
17																	
18	PR Appropriated Transfers (HB 7.540):																
19	Rent	0.00	1,136.12	1,136.12	1,136.49	1,273.39	0.00	2,424.06	0.00	0.00	0.00	0.00	0.00	0.00	7,106.18	14,309.24	7,203.06
20	DIFP Department Cost Allocation	0.00	3,230.38	3,136.16	0.00	0.00	0.00	3,265.52	0.00	0.00	0.00	0.00	0.00	0.00	9,632.06	12,430.37	2,798.31
21	Licensee Refunds	0.00	0.00	0.00	35.00	0.00	0.00	35.00	0.00	0.00	0.00	0.00	0.00	0.00	70.00	1,750.00	1,680.00
22	Start-up Loan - Borrower's Expense	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23	Division PR Transfer:																
24	Division-Wide Costs	0.00	12,800.04	9,234.82	8,057.89	10,585.41	8,578.22	19,360.48	0.00	0.00	0.00	0.00	0.00	0.00	68,616.86	176,510.52	107,893.66
25	Purchasing Staff	0.00	230.68	214.39	139.95	184.42	171.69	212.51	0.00	0.00	0.00	0.00	0.00	0.00	1,153.64	2,162.69	1,009.05
26	PR/IT Staff	0.00	2,021.80	2,986.02	1,589.48	790.59	812.70	719.52	0.00	0.00	0.00	0.00	0.00	0.00	8,920.11	10,632.63	1,712.52
27	Legal Team	0.00	2.30	2.35	2.22	2.08	11.39	2.49	0.00	0.00	0.00	0.00	0.00	0.00	22.83	283.27	260.44
28	CRR Staff	0.00	1,039.57	1,359.78	1,328.33	1,537.40	1,485.61	2,192.56	0.00	0.00	0.00	0.00	0.00	0.00	8,943.25	20,451.83	11,508.58
29	Board Specific:																
30	Expense/Equipment	0.00	1,282.27	603.31	1,058.50	2,883.36	0.00	2,983.86	0.00	0.00	0.00	0.00	0.00	0.00	8,811.30	5,961.00	(2,850.30)
31	Personal Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
32	Fringe Benefits	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
33	Technical Support Staff	0.00	599.43	494.82	1,121.60	1,019.68	516.43	384.82	0.00	0.00	0.00	0.00	0.00	0.00	4,136.78	8,842.18	4,705.40
34	Central Mail Processing	0.00	1,681.27	1,665.01	1,598.05	2,212.87	1,832.91	1,855.25	0.00	0.00	0.00	0.00	0.00	0.00	10,845.36	19,759.47	8,914.11
35	CIU Investigations	0.00	0.00	134.64	46.38	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	181.02	0.00	(181.02)
36	Total Division PR Transfer	0.00	19,657.36	16,695.14	14,942.40	19,215.81	13,408.95	27,711.49	0.00	0.00	0.00	0.00	0.00	0.00	111,631.15	244,603.59	132,972.44
41	Total PR Appropriated Transfers (HB 7.540)	0.00	24,023.86	20,967.42	16,113.89	20,489.20	13,408.95	33,436.07	0.00	0.00	0.00	0.00	0.00	0.00	128,439.39	273,093.20	144,653.81
42																	
43	GR Transfer (HB 7.535):																
44	Attorney General	0.00	0.00	0.00	623.75	0.00	0.00	2,726.04	0.00	0.00	0.00	0.00	0.00	0.00	3,349.79	70,000.00	66,650.21
45	Administrative Hearing Comm.	0.00	4,162.70	0.00	638.90	0.00	2,623.75	117.00	0.00	0.00	0.00	0.00	0.00	0.00	7,542.35	20,000.00	12,457.65
46	Total GR Transfer	0.00	4,162.70	0.00	1,262.65	0.00	2,623.75	2,843.04	0.00	0.00	0.00	0.00	0.00	0.00	10,892.14	90,000.00	79,107.86
47																	
48	Other Transfers:																
49	Workers Compensation	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
50	Unemployment	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
51	Board Staff Fringe Benefits	27,095.41	29,841.71	29,200.11	28,943.15	27,514.70	28,413.41	28,657.85	0.00	0.00	0.00	0.00	0.00	0.00	199,666.34	463,021.00	263,354.66
52	Biennium Sweep	0.00	0.00	0.00	0.00	0.00	47,137.32	0.00	0.00	0.00	0.00	0.00	0.00	0.00	47,137.32	47,137.32	0.00
53	OA Cost Allocation Transfer	0.00	5,288.00	0.00	5,288.00	0.00	0.00	5,258.00	0.00	0.00	0.00	0.00	0.00	0.00	15,834.00	21,092.02	5,258.02
54																	
55	FY 2013 Transfers Carried Over:																
56	FY 2013 June PR Transfer	16,172.93	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	16,172.93	16,172.93	0.00
57	FY 2013 July Lapse PR Transfer	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
58	FY 2013 PR Transfer Adjustment	0.00	0.00	4,033.35	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	4,033.35	4,033.35	0.00
59	FY 2013 Final Rent Transfer Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
60	FY 2013 Final DIFP Transfer Adj	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
61	FY 2013 AG - June	0.00	0.00	309.62	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	309.62	309.62	0.00
62	FY 2013 AHC - June	313.50	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	313.50	313.50	0.00
63	Total FY 2013 Transfers Carried Over	16,486.43	0.00	4,342.97	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	20,829.40	20,829.40	0.00
64	Total Transfers	43,581.84	63,316.27	54,510.50	67,643.99	51,280.79	91,583.43	70,194.96	0.00	0.00	0.00	0.00	0.00	0.00	442,111.78	1,013,287.56	571,175.78
65	Total Appropriation Costs and Transfers	136,461.77	151,233.74	152,569.73	208,018.31	131,826.25	173,480.88	171,136.21	0.00	0.00	0.00	0.00	0.00	0.00	1,124,726.89	2,627,802.56	1,503,075.67
66	Ending Fund Balance	7,172,038.58	7,482,694.84	8,143,521.21	8,379,782.90	8,312,993.15	8,180,532.27	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71	8,056,661.71			
67																	
68	Total PR Transfer - HB 7.540	16,172.93	24,023.86	25,000.77	32,150.19	23,766.09	13,408.95	33,436.07	0.00	0.00	0.00	0.00	0.00	0.00	167,958.86	318,869.00	150,910.14
69	Total GR Transfer - HB 7.535	313.50	4,162.70	309.62	1,262.65	0.00	2,623.75	2,843.04	0.00	0.00	0.00	0.00	0.00	0.00	11,515.26	119,000.00	107,484.74
70	Total	16,486.43	28,186.56	25,310.39	33,412.84	23,766.09	16,032.70	36,279.11	0.00	0.00	0.00	0.00	0.00	0.00	179,474.12	437,869.00	258,394.88

***FY 2014 YTD Expenses by Budget Class Code
As of January 31, 2014
Pharmacy (0637)
Expense & Equipment: Approp 2262***

<i>Budget Object Class</i>	<i>Budget Object Class Name</i>	<i>YTD Expended</i>	<i>Appropriation</i>	<i>Remaining Appropriation</i>	<i>Percent Remaining</i>
140	TRAVEL, IN-STATE	14,120.57	36,000.00	21,879.43	60.78%
160	TRAVEL, OUT-OF-STATE	3,481.06	17,000.00	13,518.94	79.52%
180	FUEL & UTILITIES			0.00	
190	SUPPLIES	22,847.12	57,000.00	34,152.88	59.92%
320	PROFESSIONAL DEVELOPMENT	8,735.90	9,500.00	764.10	8.04%
340	COMMUNICATION SERV & SUPP	13,148.21	18,000.00	4,851.79	26.95%
400	PROFESSIONAL SERVICES	79,690.14	443,600.00	363,909.86	82.04%
420	HOUSEKEEP & JANITOR SERV			0.00	
430	M&R SERVICES	4,112.46	13,000.00	8,887.54	68.37%
480	COMPUTER EQUIPMENT			0.00	
560	MOTORIZED EQUIPMENT	16,768.00	27,000.00	10,232.00	37.90%
580	OFFICE EQUIPMENT	43.03	3,000.00	2,956.97	98.57%
590	OTHER EQUIPMENT			0.00	
640	PROPERTY & IMPROVEMENTS		5,000.00	5,000.00	100.00%
680	BUILDING LEASE PAYMENTS	365.00	1,500.00	1,135.00	75.67%
690	EQUIPMENT RENTAL & LEASES		500.00	500.00	100.00%
740	MISCELLANEOUS EXPENSES	3,327.98	15,348.00	12,020.02	78.32%
800	PROGRAM DISTRIBUTIONS	321.50	20,000.00	19,678.50	98.39%
	TOTAL	166,960.97	666,448.00	499,487.03	74.95%

***FY 2014 YTD Expenses by Budget Class Code
As of January 31, 2014
Pharmacy (0637)
Criminal History Checks: Approp 2586***

<i>Budget Object Class</i>	<i>Budget Object Class Name</i>	<i>YTD Expended</i>	<i>Appropriation</i>	<i>Remaining Appropriation</i>	<i>Percent Remaining</i>
<i>400</i>	<i>PROFESSIONAL SERVICES</i>	<i>60.00</i>	<i>5,000.00</i>	<i>4,940.00</i>	<i>98.80%</i>
	<i>TOTAL</i>	<i>60.00</i>	<i>5,000.00</i>	<i>4,940.00</i>	<i>98.80%</i>

***FY 2014 YTD Expenses by Budget Class Code
As of January 31, 2014
Pharmacy (0637)
Personal Service: Approp 3677***

<i>Budget Object Class</i>	<i>Budget Object Class Name</i>	<i>YTD Expended</i>	<i>Appropriation</i>	<i>Remaining Appropriation</i>	<i>Percent Remaining</i>
<i>100</i>	<i>SALARIES & WAGES</i>	<i>515,594.14</i>	<i>947,067.00</i>	<i>431,472.86</i>	<i>45.56%</i>
	<i>TOTAL</i>	<i>515,594.14</i>	<i>947,067.00</i>	<i>431,472.86</i>	<i>45.56%</i>

***NOTE:** As of September the total appropriation has increased from the original amount loaded in the beginning of FY 2014 (\$943,567.00). This is due to the release of the Governor's withholding amounts (per Jane Rackers and Sherry Hess).*

**SECTION B – OPEN
HEARINGS**

Thursday, April 10, 2014
1:00 PM – 1st case

#B1 Kimberly Turner, #042688, 765 Southridge, Baxter Springs, KS, 66713, #2011-001712

ITEMS ENCLOSED:

- Notice of Disciplinary Hearing
- Consent Order
- Joint Stipulation For Cause To Discipline

BEFORE THE
STATE BOARD OF PHARMACY
STATE OF MISSOURI

MISSOURI BOARD OF PHARMACY,

Petitioner,

v.

KIMBERLY K. TURNER, R.PH.

Respondent.

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Case No. 13-0340 PH

NOTICE OF DISCIPLINARY HEARING

PLEASE TAKE NOTICE that the Missouri Board of Pharmacy, is in receipt of the Joint Stipulation for Cause to Discipline filed with the Administrative Hearing Commission on February 10, 2014, in the case of Missouri Board of Pharmacy v. Kimberly Turner, Case No. 13-0340 PH, before the Administrative Hearing Commission, State of Missouri, and the Administrative Hearing Commission's Consent Order dated February 10, 2014, wherein the Administrative Hearing Commission found that Kimberly Turner's license is subject to discipline pursuant to Section 338.055.2(8), RSMo.

NOW THEREFORE, the Missouri Board of Pharmacy shall, pursuant to Section 621.110, RSMo, hold a hearing for the purpose of determining the appropriate disciplinary action for Kimberly Turner on Thursday, April 10, 2014, at 1:00 p.m., first case on the docket, at the Courtyard by Marriott, 3301 Lemone Industrial Blvd., Columbia, Missouri. Please be advised that your failure to appear at the hearing at the above-noted time and place will result in the hearing being held in your absence. All parties should prepare a minimum of ten (10) copies of all exhibits to be presented during the hearing.

All parties will have the right to be represented by legal counsel and to a full, fair and open hearing as provided for in Chapter 536, RSMo, and Section 621.110, RSMo.

DATED: February 24, 2014

SEAL

MISSOURI BOARD OF PHARMACY

BY


KIMBERLY A. GRINSTON
EXECUTIVE DIRECTOR



Date Produced: 03/03/2014

WALZ GROUP:

The following is the delivery information for Certified Mail™/RRE item number 9314 8699 0430 0000 7842 18. Our records indicate that this item was delivered on 02/27/2014 at 11:33 a.m. in BAXTER SPRINGS, KS 66713. The scanned image of the recipient information is provided below.

Signature of Recipient :

A handwritten signature in black ink that reads "Kim Turner". The signature is written in a cursive style with a large, looped initial "K".

Address of Recipient :

A handwritten address in black ink that reads "765 So. Hwy 100". The handwriting is somewhat casual and slanted.

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,
United States Postal Service



Turner

Date Produced: 03/03/2014

WALZ GROUP:

The following is the delivery information for Certified Mail™/RRE item number 9314 8699 0430 0000 7842 32. Our records indicate that this item was delivered on 02/26/2014 at 12:59 p.m. in JEFFERSON CITY, MO 65109. The scanned image of the recipient information is provided below.

Signature of Recipient :

[Handwritten signature]
[Handwritten signature]

Address of Recipient :

[Handwritten address]

Thank you for selecting the Postal Service for your mailing needs. If you require additional assistance, please contact your local post office or Postal Service representative.

Sincerely,
United States Postal Service

Before the
Administrative Hearing Commission
State of Missouri



MISSOURI BOARD OF PHARMACY,

Petitioner,

vs.

KIMBERLY TURNER,

Respondent.

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)

No. 13-0340 PH

CONSENT ORDER

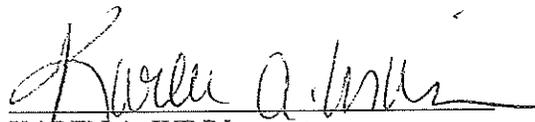
The licensing authority filed a complaint. Section 621.045¹ gives us jurisdiction.

On February 10, 2014, the parties filed a "Joint Stipulation for Cause to Discipline." Our review of the document shows that the parties have stipulated to certain facts and waived their right to a hearing before us. Because the parties have agreed to these facts, we incorporate them into this order and adopt them as stipulated. *Buckner v. Buckner*, 912 S.W. 2d 65, 70 (Mo. App., W.D. 1995). We conclude that the licensee is subject to discipline under § 338.055.2(8). We incorporate the parties' proposed findings of fact and conclusions of law into this Consent Order. We certify the record to the licensing agency under § 621.110.

The only issue before this Commission is whether the stipulated conduct constitutes cause to discipline the license. The appropriate disciplinary action is not within our power to decide; that is subject to the licensing authority's decision or the parties' agreement. Section 621.110.

We cancel the hearing.

SO ORDERED on February 10, 2014.


KAREN A. WINN
Commissioner

¹Statutory references are to RSMo Supp. 2011 unless otherwise noted.

Before the
Administrative Hearing Commission
State of Missouri



FILED

FEB 10 2014

ADMINISTRATIVE HEARING
COMMISSION

MISSOURI BOARD OF PHARMACY)
3605 Missouri Boulevard)
P.O. Box 625)
Jefferson City, MO 65102)
Petitioner,)
)
vs.)
)
KIMBERLY TURNER)
Respondent.)

Case No. 13-0340PH

JOINT STIPULATION FOR CAUSE TO DISCIPLINE

COMES NOW Petitioner Missouri Board of Pharmacy and Respondent Kimberly Turner, both parties by and through the undersigned counsel, and respectfully the Commission find cause to discipline the Pharmacy License held by Respondent, Kimberly Turner, License number 042688. In support of this Joint Stipulation for cause to discipline, the parties state as follows:

1. The Board of Pharmacy is an agency of the state of Missouri created and established pursuant to § 338.110 RSMo for the purposes of executing and enforcing the provisions of Chapter 338, RSMo.
2. Kimberly Turner (Licensee) is licensed as a pharmacist in Missouri, license number 042688. Licensee's pharmacist license is current, and was at all times relevant herein.

3. Licensee is also licensed to practice pharmacy in the state of Kansas, license number 1-11436. Licensee's Kansas pharmacist license was current and active at all times relevant herein.
 4. On October 22, 2009, Licensee and the Kansas State Board of Pharmacy entered into a Consent Agreement, wherein, "Licensee would immediately cease practicing pharmacy in the state of Kansas and would not resume the practice of pharmacy without subsequent written permission from the Board."
 5. This stipulation was based upon Licensee's admission that she was in need of treatment for substance abuse due to her admitted diversion of Oxycodone from her employer while working as a pharmacist.
 6. On October 13, 2009, Licensee entered treatment for detox and substance abuse at a facility in the state of Florida.
 7. Licensee successfully completed the Florida inpatient treatment and was transferred to outpatient treatment. She also participated in private counseling in the state of Missouri, operated by the Kansas Committee on Impaired Pharmacy Practice (CIPP).
 8. On June 9, 2010, Licensee entered into a five (5) year contract with the Kansas State Board of Pharmacy and CIPP for continuing evaluation, treatment and monitoring of her substance abuse issues. Licensee's failure to comply with her
-
- CIPP requirements may result in disciplinary action against Licensee's Kansas Pharmacist license.

9. On or about August 30, 2010, Licensee submitted to a urine drug screen as a requirement of her Kansas State Board of Pharmacy CIPP contract. The results were positive for alcohol consumption which is prohibited by the CIPP program.
10. Licensee's failure to comply with the terms and conditions of her contract with CIPP and the Kansas State Board of Pharmacy constitutes disciplinary action by another state for which cause to discipline is authorized in the state of Missouri pursuant to §338.055.2(8).
11. Licensee stipulates to the facts set forth above are true and correct and stipulates this her conduct violates § 338.055.2(8).

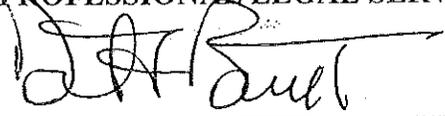
WHEREFORE, the parties, through their counsel, respectfully request the Commission find there is cause to discipline the pharmacy license of Kimberly Turner, License No. 042688 and cancel the hearing scheduled for February 10, 2014 at 1:00 p.m.

Respectfully submitted,

TINA M. CROW HALCOMB, LLC

 # 68482 FORTMCH
Tina M. Crow Halcomb #47120
1739 Elm Court, Suite 207
Jefferson City, Missouri 65101
(573) 636-7017 FAX (573) 636-7012
tina@tmchlaw.com
Attorney for the Board

PROFESSIONAL LEGAL SERVICES



David F. Barrett #43781
P.O. Box 104151
Jefferson City, MO 65110
(573) 340-9119 FAX (573) 636-1003
dfbarrett@hotmail.com
Attorney for Kimberly Turner

SECTION C – OPEN

#C1 Applications for Intern Training Pharmacy Special Site

- Allergen, Inc.
- American Pharmacists Association
- Alzheimer's Disease Research Center at Washington University
- East Coast Institute for Research
- EPI-Q, Inc.
- Express Scripts – Research Lab
- Jewel Osco / Shop 'n Save District Office
- National Association of Chain Drug Stores (NACDS)
- Sioux San Indian Health Service (HIS) Hospital Pharmacy
- University of Florida College of Pharmacy, Pharmacotherapy and Translational Research
- VA Nebraska-Western Iowa
- Walmart Corporate Office – Health and Wellness Preceptor

#C2 STLCOP and UMKC College of Pharmacy

STLCOP Preceptor Listing

License Number	State Licensed	Last Name	First Name	discipline
LICENSED IN MISSOURI				
042192	MO	Abate	Telma W.	n
2002027608	MO	Akins	Katie L.	n
043227	MO	Boatright	Tracy H.	y - 3/2000
2013028370	MO	Brooks	Natalie C.	n
2013006892	MO	Browne	Matthew R.	n
2010025183	MO	Brozovich	Alicia	n
2009146002	MO	Burns	Shanea N.	n
2013044270	MO	Bushwitz	Jennifer R.	n
2008028407	MO	Campbell	Austin R.	n
2012006914	MO	Carter	Harold L.	n
2013029804	MO	Catlin	Jennifer S.	n
2009036307	MO	Conroy	Charles S.	n
2005031065	MO	Daly	Michael W.	n
2010027142	MO	Debold	Justin M.	n
045254	MO	Fuller	Billie M.	n
2012026224	MO	Gilb	Ryan M.	n
2010014029	MO	Gowan	Mollie E.	n
2011027938	MO	Gutridge	Trent E.	n
2010037351	MO	Hagedorn	Avery C.	n
2011026583	MO	Heimberger	Lauren F.	n
1999141095	MO	Holmes	Kendra C.	n
2008027492	MO	Kempf	Katherine J.	n
044543	MO	Kloeppe	Angie R.	n
2005017357	MO	Kohler	Alma	n
040238	MO	Krusemark	Lynn A.	n
2001007278	MO	Lager	Stephanie L.	n
2007036870	MO	Levin	Jennifer J.	n
2001029148	MO	Madden	Justin	n
2011024501	MO	Melaragno	Adam M.	n
043566	MO	Ott	Gretchen A.	n
2012026458	MO	Pelletier	Jason R.	n
2013037635	MO	Pieczynski	Jessica M.	n
043931	MO	Raftery	Dennis P.	n
2012025389	MO	Rudolph (Bogue)	Jacquelyn K.	n
2010025190	MO	Skouby	Danielle D.	n
2011027372	MO	Sneath	Lynn M.	n
030067	MO	Street	Robert D.	n
2002018237	MO	Teale	Greg	n
2013026235	MO	Teegarden	Courtney M.	n
040936	MO	Wey	Nancy A.	n
2010033109	MO	Withers	Agnes	n
2013035538	MO	Wrobel	Joanna M.	n
2006021588	MO	Zielinski	Steve J.	n

NOT LICENSED IN MISSOURI			
15633	AL	Edwards	Jonathan D.
RPH57656	CA	Barbat	Sam F.
RPH41710	CA	Darji	Pravin G.
41085	CA	Sanford	Alan G.
61478	CA	Tran	Jolie (Ngoc)
61464	CA	Yasseri	Ali R.
PS48958	FL	Bisceqlia	Sarah M.
PS24851	FL	Ginter	Steven N.
PS27165	FL	Khoriarty	Eddie
PS22536	FL	Sever	Michael S.
RPH026024	GA	Galdo	John A.
RPH017615	GA	Larson	Rodna A.
RPH016059	GA	Mills	Jana B.
RPH013575	GA	Story	Carol C.
051-036985	IL	Bean	Robert T.
051-040584	IL	Burke	Robin K.
051-291306	IL	Carlton	Heather M.
051-295073	IL	Connell	Robert W.
051-287461	IL	Floyd	Meta Jo
051-037025	IL	Galli	Bradley K.
051-036827	IL	Harbin	Cassandra G.
051-294437	IL	Harper	Patrick C.
051-026448	IL	Heller	Richard C.
051-296094	IL	Joachim	Jacob J.
051-296081	IL	Liston	David M.
051-290579	IL	Natanek	Mark
051-296597	IL	Owens	Alexander R.
051-297392	IL	Patel	Hiral G.
051-031117	IL	Postelnick	Michael
26016925A	IN	Fite	Thomas C.
26022295A	IN	Lewis	James C.
26014637A	IN	Weber	William S.
015619	KY	McClelland	Robert F.
10289	MD	Lim	Larry
12788	MD	Molinaro	Ellen F.
5302040647	MI	Klipowicz	Kevin M.
118050	MN	Bonifas	Jessica R.
120591	MN	Holm	Emily J.
RP00007602	NM	Harper	Patrick C.
RPH03328551-3	OH	Whittaker	Tricia M.
RPH-00011056-P	OR	Tong	Ha H.
RP038459L	PA	Vetterly	Carol G.
11949	SC	Balcer	Holly E.
12180	TN	Babb	Karen W.

49353	TX	LaFleur	Christopher D.
41633	TX	Lewis	Angela A.
0202211233	VA	Dorich	Nicholas A.
9457-40	WI	Heun	Ted
16626-40	WI	Millham	Jordan
16403-40	WI	Riebe	Joseph D.
14546-40	WI	Smerchek	Erin L.

STLCOP Facility Listing

License Number or Special Site #	State Licensed	Facility Name	Address	Address 2	City	State	Zip	discipline
PLEASE NOTE: IF FACILITY IS LICENSED IN MULTIPLE STATES, INCLUDING MISSOURI, PLEASE LIST ONLY THE MISSOURI LICENSE								
2005037282	MO	Grace Hill Health Centers Inc.	1717 Biddle		St. Louis	MO	63106	n
2008001822	MO	CarePlus CVS/Pharmacy #1438	32 N. Euclid Ave.		St. Louis	MO	63108	n
2013033214	MO	Center Pointe Pharmacy	763 S. New Ballas Rd	Suite 100	St. Louis	MO	63141	n
2005037768	MO	Saint Luke's East Lee's Summit	100 NE Saint Luke's Blvd.		Lees Summit	MO	64086	n
2013034230	MO	Schnucks Specialty #361	11550 Page Service Dr.	Suite 101	St. Louis	MO	63146	n
006006	MO	Mercy Home Infusion	13185 Lakefront Dr.		Earth City	MO	63045	n
2013015674	MO	Kindred Hospital St. Louis	615 S. New Ballas Rd		St. Louis	MO	63141	n
2005000322	MO	Sinks Pharmacy South	1024 S. Bishop		Rolla	MO	65401	n
2013037996	MO	CVS Pharmacy #2376	3925 Lindell Blvd		St. Louis	MO	63108	n
006390	MO	Kindred Hospital St. Louis	4930 Lindell Blvd		St. Louis	MO	63108	n
004393	MO	Schnucks Pharmacy #149	5055 Arsenal		St. Louis	MO	63139	n
004342	MO	Chaffee Medicap Pharmacy #8081	211 W. Yoakum		Chaffee	MO	63740	n
2008034039	MO	Medley Pharmacy	733 W. Springfield Rd.		Gerald	MO	63037	n
LICENSED OUTSIDE OF MISSOURI								
17380	CA	Napa State Hospital	2100 Napa Vallejo Hwy		Napa	CA	94558	
PHY49768	CA	Community, A Walgreens Pharmacy	640 University Ave.		San Diego	CA	92103	
PHH40564	CA	Morneo Valley Pharmacy	12980 Frederick St. #B		Moreno Valley	CA	92553	
PH23680	FL	Walgreens Pharmacy #10668	2575 NE Highway 70		Arcadia	FL	34266	
PH001663	FL	Hospice of Marion County dba Palliative Care Pharamcy	2891 SE 62nd Street		Ocala	FL	34480	
PH14144	FL	PetMed Express (1800PetMeds)	1441 S.W. 29th Avenue		Pompano Beach	FL	33069	
PHRE006359	GA	Barney's Pharmacy	2604 Peach Orchard Rd.		Augusta	GA	30906	
PHH004000	GA	Dekalb Medical Center	2701 North Decatur		Decatur	GA	30033	
054-018196	IL	Walgreens Pharmacy #15636	221 NE Glen Oak Ave.	Suite A	Peoria	IL	61636	
054-017871	IL	Sullivan Drugs of Litchfield	320 East Union Ave		Litchfield	IL	62234	
054-011546	IL	Bond Drug Co. of IL, LLC. DBA Walgreens #3089	120 E. Main St.		Streator	IL	61364	
054-017559	IL	Axline Pharmacy/Axline Advanced	1210 Towanda Ave Unit 10/11		Bloomington	IL	61701	
054-018166	IL	Axline Pharmacy/Axline Advanced	1210 Towanda Ave Unit 10/11		Bloomington	IL	61701	
054-01782	IL	Advocate Lutheran General Hospital	1775 Dempster St.		Park Ridge	IL	60068	
054-017311	IL	Elizabeth Ludeman Developmental Center	114 North Orchard Dr.		Park Forest	IL	60466	
054-006599	IL	Walgreens Pharmacy #09792	625 W. Pershing Ave.		Decatur	IL	62526	
054-014985	IL	Medicine Shoppe #1445	207 E. Main		Duquoin	IL	62832	
054-017092	IL	Advocate Medical Center	1357 West 103rd St.		Chicago	IL	60643	
054-017320	IL	Chester Mental Health Center	1315 Lehman Dr.		Chester	IL	62233	
60005709A	IN	Walgreens Pharmacy #06965	15005 SR 23		Granger	IN	46530	
60006091A	IN	Scotts Pharmacy	10230 Chestnut Plaza Dr.		Fort Wayne	IN	46814	
P05119	KY	The Medical Center	250 Park St.		Bowling Green	KY	42101	
5301006188	MI	Rite Aid #4238	3681 Shawnee Rd		Bridgman	MI	49106	
262255	MN	Mackenthun Beck Pharmacy Inc.	851 Marketplace Dr.		Waconia	MN	55387	
200532	MN	Avera Marshall Regional Medical Center	300 S. Bruce Street		Marshall	MN	56258	
RP-0001989	OR	Walgreens Pharmacy #06831	7010 NE Cornell Rd.		Hillsboro	OR	97124	
HP418038L	PA	Children's Hospital of Pittsburgh	4401 Penn Ave		Pittsburgh	PA	15224	
00000286	TN	Memorial Health Care System	2525 DeSales Ave		Chattanooga	TN	37404	
22156	TX	Target Pharmacy #1459	345 Silverlake Village St.		Pearland	TX	77584	
8712-42	WI	Pick and Save Pharmacy #6880	1235 W. Silver Spring Dr.		Glendale	WI	53209	
7301-42	WI	Kealey Pharmacy	21 S. Jackson St.		Janesville	WI	53548	

UMKC Preceptor Listing

License Number	State Licensed	Last Name	First Name	Discipline
LICENSED IN MISSOURI				
2013000710	MO	Chisholm	Julia	n
2013022795	MO	Loy	Jordyn	n
2010027758	MO	Sullins	Amanda	n
2012026458	MO	Pelletier	Jason	n
2011027490	MO	Cummings	Amy	n
2011027155	MO	Eickman	Elizabeth	n
2013029805	MO	Wood	Angela	n
2013044275	MO	Kar	Indrani	n
2012027499	MO	Perkins	Michael	n
2013024756	MO	Hollabaugh	Mariah	n
2013016874	MO	Ganti	Beejal	n
2013027405	MO	Brockman	Elizabeth	n
2012017837	MO	Svoboda	Erin	n
2013028385	MO	Nguyen	Tinh	n
029900	MO	Scott	Joe	n
045113	MO	Small	Aaron	n
2009021438	MO	Pitcher	Christine	n
2011020688	MO	Aubrey	Sean	n
042235	MO	Sekarski	Patrick	n
2012020929	MO	Cook	Amanda	n
2002017019	MO	Weidle	Mark	n
043861	MO	Morgan	Lori	n
040857	MO	Morrison	Thomas	n
044976	MO	Caldwell	Stacy	n
NOT LICENSED IN MISSOURI				
1-15249	KS	Nowicki	Katherine	
1-16025	KS	Stang	Jenna	
13083-40	WI	Zumach	Gregory	
1-13400	KS	Vu	Francis	
2047	AK	Hall	Amy	
1-13068	KS	Berry	Nolan	
PD07864	AR	Dunham	Robert	
1-14494	KS	Woods	Chase	
PH60007069	WA	Gardner	Matthew	
62257	CA	Stout	Ty	
051293878	IL	Shick	Kyle	
PH60086614	WA	Gruntowicz	Don	
PH60202597	WA	Steele	Blythe	
S012685	AZ	Walmsley	Lorri	
1197	AK	Thompson	Karen	
3178	HI	Sievert	Britta	
14489	IA	Richardson	Larry	
26024486A	IN	Knapp	Aaron	
10021	NE	Hiland	Susanne	
051289871	IL	Green	Kristi	
12506	NE	Hrdy	Michaela	
26020825A	IN	Sims	Kelly	
PH00056558	WA	Tsung	David	
06989	NC	Morton	Detra	

SECTION D – OPEN

DISCUSSION AGENDA

#D1 DEA Hydrocodone Rescheduling Rule

- 21 CFR Part 1308



U.S. DEPARTMENT OF JUSTICE ★ DRUG ENFORCEMENT ADMINISTRATION

OFFICE OF DIVERSION CONTROL

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[RESOURCES](#) > [Federal Register Notices](#) > [Rules - 2014](#) > [Rescheduling of Hydrocodone Combination Products From Schedule III to Schedule II](#)

Rules - 2014

[Federal Register Volume 79, Number 39 (Thursday, February 27, 2014)]
 [Proposed Rules]
 [Pages 11037-11045]
 From the Federal Register Online via the Government Printing Office [www.gpo.gov]
 [FR Doc No: 2014-04333]

DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[21 CFR Part 1308](#)

[Docket No. [DEA-389](#)]

Schedules of Controlled Substances: Rescheduling of Hydrocodone Combination Products From Schedule III to Schedule II

AGENCY: Drug Enforcement Administration, Department of Justice.

ACTION: Notice of proposed rulemaking.

SUMMARY: The Drug Enforcement Administration (DEA) proposes to reschedule hydrocodone combination products from schedule III to schedule II of the Controlled Substances Act. This proposed action is based on a rescheduling recommendation from the Assistant Secretary for Health of the Department of Health and Human Services and an evaluation of all other relevant data by the DEA. If finalized, this action would impose the regulatory controls and administrative, civil, and criminal sanctions applicable to schedule II controlled substances on persons who handle (manufacture, distribute, dispense, import, export, engage in research, conduct instructional activities, or possess) or propose to handle hydrocodone combination products.

DATES: Interested persons may file written comments on this proposal pursuant to [21 CFR 1308.43\(g\)](#). Electronic comments must be submitted, and written comments must be postmarked, on or before April 28, 2014. Commenters should be aware that the electronic Federal Docket Management System will not accept comments after midnight Eastern Time on the last day of the comment period.

[[Page 11038]]

Interested persons, defined as those "adversely affected or aggrieved by any rule or proposed rule issuable pursuant to section 201 of the Act ([21 U.S.C. 811](#))," [21 CFR 1300.01](#), may file a request for hearing or waiver of an opportunity for a hearing or to participate in a hearing pursuant to [21 CFR 1308.44](#) and in accordance with [21 CFR 1316.45](#), [1316.47](#), [1316.48](#) or [1316.49](#), as applicable. Requests for hearing, notices of appearance, and waivers of an opportunity for a hearing or to participate in a hearing must be received on or before March 31, 2014.

ADDRESSES: To ensure proper handling of comments, please reference "Docket No. DEA-389" on all electronic and written correspondence. The DEA encourages that all comments be submitted electronically through the Federal eRulemaking Portal which provides the ability to type short comments directly into the comment field on the Web page or attach a file for lengthier comments. Please go to [www.regulations.gov](#) and follow the on-line instructions at that site for submitting comments. Paper comments that duplicate electronic submissions are not necessary. Should you, however, wish to submit written comments, in lieu of electronic comments, they should be sent via regular or express mail to: Drug Enforcement Administration, Attention: DEA Federal Register Representative/ODW, 8701 Morrisette Drive, Springfield, Virginia 22152. All requests for a hearing and waivers of participation must be sent to: Drug Enforcement Administration, Attention: Hearing Clerk/LJ, 8701 Morrisette Drive, Springfield, Virginia 22152.

FOR FURTHER INFORMATION CONTACT: Ruth A. Carter, Office of Diversion Control, Drug Enforcement Administration; Mailing Address: 8701 Morrisette Drive, Springfield, Virginia 22152, Telephone: (202) 598-6812.

SUPPLEMENTARY INFORMATION:

Posting of Public Comments

Please note that all comments received in response to this docket are considered part of the public record and will be made available for public inspection online at [www.regulations.gov](#). Such information includes personal identifying information (such as your name, address, etc.) voluntarily submitted by the commenter.

The Freedom of Information Act (FOIA) applies to all comments received. If you want to submit personal identifying information (such as your name, address, etc.) as part of your comment, but do not want it to be made publicly available, you must include the phrase "PERSONAL IDENTIFYING INFORMATION" in the first paragraph of your comment. You must also place all of the personal identifying information you do not want made publicly available in the first paragraph of your comment and identify what information you want redacted.

If you want to submit confidential business information as part of your comment, but do not want it to be made publicly available, you must include the phrase "CONFIDENTIAL BUSINESS INFORMATION" in the first paragraph of your comment. You must also prominently identify the confidential business information to be redacted within the comment. If a comment has so much confidential business information that it cannot be effectively redacted, all or part of that comment may not be made publicly available. Comments containing personal identifying information or confidential business information identified as directed above will be made publicly available in redacted form.

An electronic copy of this document and supplemental information to this proposed rule are available at www.regulations.gov for easy reference. If you wish to personally inspect the comments and materials received or the supporting documentation the DEA used in preparing the proposed action, these materials will be available for public inspection by appointment. To arrange a viewing, please see the "For Further Information Contact" paragraph above.

Request for Hearing, Notice of Appearance at Hearing, or Waiver of an Opportunity for a Hearing or To Participate in a Hearing

Pursuant to the provisions of the Controlled Substances Act (CSA), **21 U.S.C. 811(a)**, this action is a formal rulemaking "on the record after opportunity for a hearing." Such proceedings are conducted pursuant to the provisions of the Administrative Procedure Act (APA), 5 U.S.C. 551-559. **21 CFR 1308.41-1308.45; 21 CFR Part 1316 subpart D**. In accordance with **21 CFR 1308.44(a)-(c)**, requests for a hearing, notices of appearance, and waivers of an opportunity for a hearing or to participate in a hearing may be submitted only by interested persons, defined as those "adversely affected or aggrieved by any rule or proposed rule issuable pursuant to section 201 of the Act (21 U.S.C. 811)." **21 CFR 1300.01**. Requests for hearing and notices of appearance must conform to the requirements of 21 CFR 1308.44(a) or (b), and **1316.47** or **1316.48** as applicable, and include a statement of the interest of the person in the proceeding and the objections or issues, if any, concerning which the person desires to be heard. Any waiver must conform to the requirements of 21 CFR 1308.44(c) and **1316.49**, including a written statement regarding the interested person's position on the matters of fact and law involved in any hearing.

Please note that pursuant to **21 U.S.C. 811(a)(1)**, the purpose and subject matter of a hearing held in relation to this rulemaking is restricted to: "(A) find[ing] that such drug or other substance has a potential for abuse, and (B) mak[ing] with respect to such drug or other substance the findings prescribed by subsection (b) of section **812** of [title 21] for the schedule in which such drug is to be placed * * *." Requests for a hearing, notices of appearance at a hearing, and waivers of an opportunity for a hearing or to participate in a hearing must be submitted to the DEA using the address information provided above.

Legal Authority

The DEA implements and enforces titles II and III of the Comprehensive Drug Abuse Prevention and Control Act of 1970, as amended. Titles II and III are referred to as the "Controlled Substances Act" and the "Controlled Substances Import and Export Act," respectively, and are collectively referred to as the "Controlled Substances Act" or the "CSA" for the purpose of this action. **21 U.S.C. 801-971**. The DEA publishes the implementing regulations for these statutes in title 21 of the Code of Federal Regulations (CFR), **parts 1300 to 1321**. The CSA and its implementing regulations are designed to prevent, detect, and eliminate the diversion of controlled substances and listed chemicals into the illicit market while providing for the legitimate medical, scientific, research, and industrial needs of the United States. Controlled substances have the potential for abuse and dependence and are controlled to protect the public health and safety.

Under the CSA, controlled substances are classified into one of five schedules based upon their potential for abuse, their currently accepted medical use, and the degree of dependence the substance may cause. **21 U.S.C. 812**. The initial schedules of controlled substances established by Congress are found at 21 U.S.C. 812(c), and the current list of all scheduled substances is published at **21 CFR Part 1308**. 21 U.S.C. 812(a).

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Pursuant to **21 U.S.C. 811(a)(1)**, the Attorney General may, by rule, "add to such a schedule or transfer between such schedules any drug or other substance if he (A) finds that such drug or other substance has a potential for abuse, and (B) makes with respect to such drug or other substance the findings prescribed by **[21 U.S.C. 812(b)]** for the schedule in which such drug is to be placed * * *." Pursuant to 28 CFR 0.100(b), the Attorney General has delegated this scheduling authority to the Administrator of the DEA.

The CSA provides that the scheduling of any drug or other substance may be initiated by the Attorney General (1) on his own motion; (2) at the request of the Secretary of the Department of Health and Human Services (HHS); or (3) on the petition of any interested party. **21 U.S.C. 811(a)**. This proposed action was initiated by a petition to reschedule hydrocodone combination products (HCPs) \1\ from schedule III to schedule II of the CSA, and is supported by, inter alia, a recommendation from the Assistant Secretary for Health of the HHS.\2\ If finalized, this action would impose the regulatory controls and administrative, civil, and criminal sanctions of schedule II controlled substances on any person who handles, or proposes to handle, HCPs.

\1\ Hydrocodone combination products (HCPs) are pharmaceuticals containing specified doses of hydrocodone in combination with other drugs in specified amounts. These products are approved for marketing for the treatment of pain and for cough suppression.

\2\ As set forth in a memorandum of understanding entered into by the HHS, the Food and Drug Administration (FDA), and the National Institute on Drug Abuse (NIDA), the FDA acts as the lead agency within the HHS in carrying out the Secretary's scheduling responsibilities under the CSA, with the concurrence of the NIDA. 50 FR 9518, Mar. 8, 1985. The Secretary of the HHS has delegated to the Assistant Secretary for Health of the HHS the authority to make domestic drug scheduling recommendations.

Background

Hydrocodone was listed in schedule II of the CSA upon the enactment of the CSA in 1971. Public Law 91-513, 84 Stat. 1236, sec. 202(c), schedule II, paragraph (a), clause (1) (codified at **21 U.S.C. 812(c)**); initially codified at 21 CFR 308.12(b)(1)(x) (36 FR 7776, April 24, 1971) (currently codified at **21 CFR 1308.12(b)(1)(vi)**). At that time, HCPs in specified doses (containing no greater than 15 milligrams (mg) hydrocodone per dosage unit or not more than 300 mg hydrocodone per 100 milliliters) were listed in schedule III of the CSA when formulated with specified amounts of an isoquinoline alkaloid of opium or one or more therapeutically active nonnarcotic ingredients. Public Law 91-513, 84 Stat. 1236, sec. 202(c), schedule III, paragraph (d), clauses (3) and (4) (codified at 21 U.S.C. 812(c)); initially codified at 21 CFR 308.13(e)(3) and (4) (36 FR 7776, April 24, 1971) (currently codified at **21 CFR 1308.13(e)(1)(iii)** and (iv)). Any other products that contain single-entity hydrocodone or combinations of hydrocodone and other substances outside the range of specified doses are listed in schedule II of the CSA.\3\

\3\ In the United States there are currently no approved, marketed, products containing hydrocodone in combination with other active ingredients that fall outside schedule III of the CSA. Further, until recently, there were no approved hydrocodone single-entity schedule II products. In Oct. 2013, the FDA approved ZohydroTM ER, a single-entity, extended release schedule II product. The sponsor of this product in a press release dated Oct. 25, 2013, stated that ZohydroTM ER will be launched in approximately four months. Accordingly, all of the historical data regarding hydrocodone from different national and regional databases that support this proposal should refer to HCPs only, regardless of whether the database utilizes the term "hydrocodone" or "hydrocodone combination products."

Proposed Determination To Transfer HCPs to Schedule II

Pursuant to **21 U.S.C. 811(a)**, proceedings to add a drug or substance to those controlled under the CSA, or to transfer a drug between schedules, may be initiated on the petition of any interested party. In response to a petition the DEA had received requesting that HCPs be controlled in schedule II of the CSA, in 2004 the DEA submitted a request to the HHS to provide the DEA with a scientific and medical evaluation of available information and a scheduling recommendation for HCPs, pursuant to 21 U.S.C 811(b) and (c). In 2008 the HHS provided to the DEA its recommendation that HCPs remain controlled in schedule III of the CSA. In response, in 2009, the DEA requested that the HHS re-evaluate their data and provide another scientific and medical evaluation and scheduling recommendation based on additional data and analysis.

On July 9, 2012, President Obama signed the Food and Drug Administration Safety and Innovation Act (Pub. L. 112-144) (FDASIA). Section 1139 of the FDASIA \4\ directed the Food and Drug Administration (FDA) to hold a public meeting to "solicit advice and recommendations" pertaining to the scientific and medical evaluation in connection with its scheduling recommendation to the DEA regarding drug products containing hydrocodone, combined with other analgesics or as an antitussive. Additionally the Secretary was required to solicit stakeholder input "regarding the health benefits and risks, including the potential for abuse" of hydrocodone combination products and the impact of up-scheduling of these products. Accordingly, on January 24-25, 2013, the FDA held a public Advisory Committee meeting at which the DEA made a presentation. The Advisory Committee included members with scientific and medical expertise in the subject of opioid abuse, and a patient representative. Members included representatives from National Institute on Drug Abuse (NIDA) and the Centers for Disease Control (CDC). There was also an opportunity for the public to provide comment. The Advisory Committee voted 19 to 10 in favor of recommending that hydrocodone combination products be placed into schedule II. According to the FDA, 768 comments were submitted by patients, patient groups, advocacy groups, and professional societies

to the FDA.

14\ FDASIA, SEC1139. SCHEDULING OF HYDROCODONE. (a) IN GENERAL.--Not later than 60 days after the date of enactment of this Act, if practicable, the Secretary of Health and Human Services (referred to in this section as the "Secretary") shall hold a public meeting to solicit advice and recommendations to assist in conducting a scientific and medical evaluation in connection with a scheduling recommendation to the Drug Enforcement Administration regarding drug products containing hydrocodone, combined with other analgesics or as an antitussive. (b) STAKEHOLDER INPUT.--In conducting the evaluation under subsection (a), the Secretary shall solicit input from a variety of stakeholders including patients, health care providers, harm prevention experts, the National Institute on Drug Abuse, the Centers for Disease Control and Prevention, and the Drug Enforcement Administration regarding the health benefits and risks, including the potential for abuse and the impact of up-scheduling of these products.

Upon evaluating the scientific and medical evidence, along with the above considerations (e.g., recommendation of the Advisory Committee, the public comments, consideration of the health benefits and risks, and information about the impact of rescheduling) mandated by the FDASIA, the HHS on December 16, 2013, submitted to the Administrator of the DEA its scientific and medical evaluation (henceforth called HHS review) entitled, "Basis for the Recommendation to Place Hydrocodone Combination Products in Schedule II of the Controlled Substances Act." Pursuant to 21 U.S.C. 811(b), this document contained an eight-factor analysis of the abuse potential of HCPs, along with the HHS's recommendation to control HCPs under schedule II of the CSA. The HHS stated that the comments received during the open public hearing, to the docket, and the discussion of the Advisory Committee

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members of the FDA Advisory Committee meeting provided support for its conclusion that individuals are taking HCPs in amounts sufficient to create a hazard to their health or to the safety of other individuals or to the community; that there is significant diversion of HCPs; and that individuals are taking HCPs on their own initiative rather than on the basis of medical advice from a practitioner licensed by law to administer such drugs. The HHS stated it has also given careful consideration to the fact that the members of the Advisory Committee voted 19 to 10 in favor of rescheduling HCPs from schedule III to schedule II under the CSA. The HHS considered the increasing trends, the public comments, the recommendation of the Advisory Committee, the health benefits and risks, and the information available about the impact of rescheduling, and concluded that HCPs have high potential for abuse.

Summary of Eight Factor Analyses

The DEA has reviewed the scientific and medical evaluation and scheduling recommendation provided by the HHS, and all other relevant data, and completed its own eight-factor review document pursuant to 21 U.S.C. 811(c). Included below is a brief summary of each factor as considered by the DEA in its proposed rescheduling action. Both the DEA and HHS analyses are available in their entirety in the public docket for this proposed rule (Docket No. DEA-389) at www.regulations.gov under "Supporting and Related Material." Full analysis of, and citations to, information referenced in this summary may also be found in the supporting material.

1. The Drug's Actual or Relative Potential for Abuse

The term "abuse" is not defined in the CSA. However, the legislative history of the CSA provides the following criteria to determine whether a particular drug or substance has a potential for abuse: 15\

15\ Comprehensive Drug Abuse Prevention and Control Act of 1970, H.R. Rep. No 91-1444, 91st Cong., Sess.1 (1970) reprinted in U.S.C.C.A.N. 4566, 4601.

- (a) Individuals are taking the drug or other substance in amounts sufficient to create a hazard to their health or to the safety of other individuals or to the community; or
- (b) There is a significant diversion of the drug or other substance from legitimate drug channels; or
- (c) Individuals are taking the drug or other substance on their own initiative rather than on the basis of medical advice from a practitioner licensed by law to administer such drugs; or
- (d) The drug is so related in its action to a drug or other substance already listed as having a potential for abuse to make it likely that it will have the same potential for abuse as such substance, thus making it reasonable to assume that there may be significant diversions from legitimate channels, significant use contrary to or without medical advice, or that it has a substantial capability of creating hazards to the health of the user or to the safety of the community.

The DEA considered the HHS's evaluation and all other relevant data, including data related to the above mentioned criteria, and finds that:

(a) *Individuals are using HCPs in amounts sufficient to create a hazard to their health, to the safety of other individuals, or to the community.*

The HHS states that there are increasing trends in the adverse effects from abuse of HCPs, including emergency department (ED) visits, admissions to addiction treatment centers, and deaths in selected States. In 2011, HCPs were listed in 3,376 admissions for drug treatment as the primary drug of abuse and in 6,601 admissions listing HCPs in addition to other drugs in the Treatment Episode Data Set (TEDS). 16\ HCPs are prescribed in an unprecedented manner and their total prescriptions exceed prescriptions for any other opioid analgesic; this characteristic drives their abuse potential and sets them apart from other opioid analgesics in terms of abuse risks.

16\ TEDS is a program coordinated and managed by the SAMHSA. This database includes information on treatment admissions that are routinely collected by states to monitor their individual substance abuse treatment systems. Thus, TEDS includes data primarily from treatment facilities that receive public funds. TEDS includes information on demographic variables including age, gender, race and ethnicity. TEDS also reports on the top three drugs of abuse at the time of admission. TEDS does not include all drugs that may have been abused prior to admission. States and jurisdictions can choose whether or not to report the detailed listing.

Drug Abuse Warning Network (DAWN) 17\ data indicate that abuse of HCPs, similar to oxycodone products 18\ (schedule II), has been associated with large numbers of admissions to the ED. For example, in 2011 the total number of ED visits related to nonmedical use of HCPs and oxycodone products were 82,479 and 151,218, respectively. 19\ The American Association of Poison Control Centers' National Poison Data System 10\ (NPDS; formerly known as Toxic Exposure Surveillance System or TESS) reported that HCPs were involved in 30,792 and 29,391 annual toxic exposures in 2011 and 2012, respectively. The corresponding data for oxycodone products was 19,423 and 18,495. The majority of exposures for both drug products were for intentional reasons. 11\

17\ The Drug Abuse Warning Network (DAWN) is a nationally representative public health surveillance system that continuously monitors drug-related visits to hospital EDs. The DAWN data are used to monitor trends in drug misuse and abuse in the United States. DAWN captures both ED visits that are directly caused by drugs and those in which drugs are a contributing factor but not the direct cause of the ED visit.

18\ Unless otherwise specified, for purposes of this document "oxycodone products" refers to both its single-entity and its combination products. All oxycodone products are schedule II controlled substances.

19\ In DAWN, nonmedical use of pharmaceuticals includes taking more than the prescribed dose of a prescription pharmaceutical or more than the recommended dose of an over-the-counter pharmaceutical or supplement; taking a pharmaceutical prescribed for another individual; deliberate poisoning with a pharmaceutical

by another person; and documented misuse or abuse of a prescription drug, an over-the-counter pharmaceutical, or a dietary supplement.

\10\ The American Association of Poison Control Centers (AAPCC) maintains the national database of information logged by the United States' 57 Poison Control Centers (PCCs). Case records in this database are from self-reported calls: they reflect only information provided when the public or healthcare professionals report an actual or potential exposure to a substance (e.g., an ingestion, inhalation, or topical exposure, etc.), or request information/ educational materials. Exposures do not necessarily represent a poisoning or overdose. The AAPCC is not able to completely verify the accuracy of every report made to member centers. Additional exposures may go unreported to PCCs and data referenced from the AAPCC should not be construed to represent the complete incidence of national exposures to any substance(s).

\11\ According to the AAPCC's NPDS database, "intentional reasons" include suspected suicide, misuse, abuse, and intentional unknown.

The HHS mentions that nationwide estimates of overdose deaths due to HCPs cannot be quantified, but the available data for a limited number of States suggest that HCPs contribute to a substantial number of overdose deaths each year. According to the HHS, DAWN medical examiner (ME) data for five States from 2004 through 2010 reported an increase of 63% and 133% in deaths related to HCPs and oxycodone products, respectively. According to the Florida Department of Law Enforcement (FDLE),\12\ HCPs have

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been associated with large numbers of deaths in Florida. For example, in 2012, HCPs were associated with 777 deaths, while oxycodone products were associated with 1,426.

\12\ The Florida Department of Law Enforcement Medical Examiners Commission publishes an Annual Medical Examiners Report, the Annual and Interim Drugs in Deceased Persons Report. In order for a death to be considered "drug-related" at least one drug identified must be in the decedent; each identified drug is a drug occurrence. The State's medical examiners were asked to distinguish between whether the drugs were the "cause" of death or merely "present" in the body at the time of death. A drug is only indicated as the cause of death when, after examining all evidence and the autopsy and toxicology results, the medical examiner determines the drug played a causal role in the death. It is not uncommon for a decedent to have multiple drugs listed as a cause of death. Although a medical examiner may determine a drug is present or detected in the decedent, the drug may not have played a causal role in the death. A decedent may have multiple drugs listed as present.

As summarized below, a review of drug abuse indicators for HCPs over the past several years further indicates that these products, similar to oxycodone products, are among the most widely diverted and abused drugs in the country and have high potential for abuse.

(b) There is a significant diversion of HCPs from legitimate drug channels.

According to forensic laboratory data as reported by the National Forensic Laboratory System 13 14 (NFLIS) and the System to Retrieve Information from Drug Evidence \15\ (STRIDE), HCPs, similar to oxycodone products, are among the top 10 most frequently encountered drugs. From 2002 through 2010, total cases (from both NFLIS and STRIDE) for both HCPs and oxycodone products gradually increased with some decline in 2011 and 2012. From 2002 through 2008, annual total cases involving HCPs (range: 9,106 in 2002 to 33,611 in 2008) consistently exceeded those for oxycodone products (range: 7,993 in 2002 to 28,343 in 2008). In 2009, total cases for HCPs (37,894) were similar to that for oxycodone products (37,680). From 2010 through 2012, total cases for oxycodone products (47,238 in 2010 and 41,915 in 2012) exceeded those for HCPs (39,261 in 2010 and 34,832 in 2012). The DEA has documented a large number of diversion and trafficking cases involving HCPs. DEA investigations conducted from 2005 through 2007 determined that HCPs were diverted from rogue Internet pharmacies.

\13\ The NFLIS is a program of the DEA, Office of Diversion Control. NFLIS systematically collects drug identification results and associated information from drug cases submitted to and analyzed by State and local forensic laboratories. NFLIS represents an important resource in monitoring illicit drug abuse and trafficking, including the diversion of legally manufactured pharmaceuticals into illegal markets. NFLIS is a comprehensive information system that includes data from forensic laboratories that handle approximately 90% of an estimated 1.0 million distinct annual State and local drug analysis cases. NFLIS includes drug chemistry results from completed analyses only.

\14\ While NFLIS data is not direct evidence of abuse, it can lead to an inference that a drug has been diverted and abused. See 76 FR 77330, 77332, Dec. 12, 2011.

\15\ STRIDE is a database of drug exhibits sent to DEA laboratories for analysis. Exhibits from the database are from the DEA, other federal agencies, and local law enforcement agencies.

(c) Individuals are using HCPs on their own initiative rather than on the basis of medical advice.

According to the data from the National Survey on Drug Use and Health \16\ (NSDUH), the lifetime (i.e., ever used) users of HCPs for nonmedical purposes exceeded those for oxycodone products in the United States. For example, in 2004, over 17.7 million Americans age 12 years or older reported lifetime nonmedical use of HCPs as compared to over 11.9 million reported for oxycodone products. In 2012, the corresponding data for HCPs and oxycodone products were over 25.6 and 16 million, respectively. The NSDUH also reported large increases from 2004 through 2012 in the number of individuals using HCPs and oxycodone products for nonmedical purposes.

\16\ The National Survey on Drug Use and Health, formerly known as the National Household Survey on Drug Abuse (NHSDA), is conducted annually by the Department of Health and Human Service's Substance Abuse and Mental Health Services Administration (SAMHSA). It is the primary source of estimates of the prevalence and incidence of nonmedical use of pharmaceutical drugs, illicit drugs, alcohol, and tobacco use in the United States. The survey is based on a nationally representative sample of the civilian, non-institutionalized population 12 years of age and older. The NSDUH provides yearly national and state level estimates of drug abuse, and includes prevalence estimates by lifetime (i.e., ever used), past year, and past year abuse or dependence.

The past year initiates (i.e., the first use of a substance within the 12 months prior to the interview date) of HCPs exceeded those of oxycodone products from 2002 through 2005. Past year initiates for HCPs were over 1.3, 1.4, 1.3 and 1.3 million in 2002, 2003, 2004 and 2005, respectively. The corresponding data for oxycodone products were over 0.47, 0.5, 0.6 and 0.45 million. According to a report by the NSDUH, the combined data from 2002 through 2005 indicate that 57.7% of persons who first used pain relievers nonmedically in the past year used HCPs while 21.7% used oxycodone products. The NSDUH data from 2002 through 2006 also indicate that the lifetime users of HCPs have a higher propensity than that of lifetime users of oxycodone immediate release products (single-entity and combination products combined) to have used for nonmedical purposes any pain relievers in the past year.

According to the Monitoring the Future \17\ (MTF) survey, from 2002 through 2011 the annual prevalence of nonmedical use of Vicodin[supreg], an HCP, ranged from about 8% to 10.5% among high school seniors (12th graders) and exceeded that of OxyContin[supreg] (4% to 5.5%), an oxycodone extended release product. In 2012, the annual prevalence rate for nonmedical use of OxyContin[supreg] was 1.6%, 3.0%, and 4.3% among 8th, 10th and 12th graders, respectively. The corresponding rates for Vicodin[supreg] were 1.3%, 4.4% and 7.5%. According to the MTF, the annual prevalence of nonmedical use of Vicodin[supreg] in college students and young adults was 3.8% and 6.3% in 2012. The corresponding data for OxyContin[supreg] were 1.2% and 2.3%. The aforementioned data from drug abuse surveys (NSDUH and MTF) collectively indicate high prevalence of abuse of HCPs among Americans including students thereby indicating their high abuse potential.

\17\ Monitoring the Future (MTF) is a national survey conducted by the Institute for Social Research at the University of Michigan under a grant from the NIDA that tracks drug use trends among American adolescents among the 8th, 10th, and 12th grades.

(d) HCPs are so related in their action to a drug or other substance already listed as having a potential for abuse to make it likely that they will have the same potential for abuse as such substance, thus making it reasonable to assume that there may be significant diversion from legitimate channels, significant use contrary to or without medical advice, or that they have a substantial capability of creating hazards to the health of the user or to the safety of the community.

Hydrocodone possesses abuse liability effects substantially similar to morphine (schedule II) in both animals and humans. Hydrocodone, similar to morphine, is a [mu] opioid receptor agonist and shares pharmacological properties with morphine. Hydrocodone substitutes for morphine in animals trained to discriminate the presence and absence of morphine. Hydrocodone, similar to morphine, is self-administered by animals. Hydrocodone substitutes for morphine in opioid-dependent subjects. Clinical abuse liability studies have also demonstrated that HCPs (Hycodan[supreg] or hydrocodone in combination with acetaminophen) are similar to morphine with respect to physiological effects, subjective effects, and drug "liking" scores.

Hydrocodone/acetaminophen and oxycodone/acetaminophen combination products at equi-miotic doses, in general, produce similar profiles of psychopharmacological effects. These two opioid products produced prototypic opiate-like effects and psychomotor impairment of similar magnitudes.

Collectively these data demonstrate that HCPs have a high potential for abuse similar to other schedule II opioid analgesic drugs such as morphine and oxycodone products.

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2. Scientific Evidence of the Drug's Pharmacological Effects, if Known

The HHS states that hydrocodone's pharmacological effects are similar to other [micro] opioid receptor agonists. It is effective as an antitussive agent and as an analgesic drug. Opioid analgesics have an important role in the management of pain. HCPs contain other nonnarcotic active ingredients such as acetaminophen, nonsteroidal anti-inflammatory drugs (NSAIDs) (aspirin and ibuprofen), chlorpheniramine or homatropine methylbromide. The mechanism of analgesic and antitussive effects of HCPs are different from those of nonnarcotic active ingredients present in HCPs. Acetaminophen and NSAIDs are less effective against severe pain, but have a recognized role in a variety of pain settings.

HCPs, similar to other opioid analgesics such as oxycodone products, are associated with a substantial number of overdose, suicide, abuse, and dependence reports. Overdose of HCPs, similar to other opioid analgesics, can lead to respiratory depression and death. Common adverse effects of NSAIDs include gastrointestinal, cardiovascular, renal and renovascular adverse events, and hepatic injury. Acetaminophen has low incidence of gastrointestinal side effects and is a common household analgesic available over the counter. Overdoses of acetaminophen can cause severe hepatic damage and death. Opioid/acetaminophen combination products are linked to numerous liver injuries.

3. The State of Current Scientific Knowledge Regarding the Drug or Other Substance

The HHS provided additional scientific information with focus on chemical and toxicological properties of hydrocodone and nonnarcotic components of HCPs. Hydrocodone is a semisynthetic opioid. The bitartrate salt form of hydrocodone is the main active component in all currently marketed HCPs. Nonnarcotic drugs present as co-ingredients are acetaminophen, aspirin, ibuprofen, chlorpheniramine or homatropine methylbromide. Hydrocodone and nonnarcotic drugs present in HCPs have potential to produce adverse effects.

4. Its History and Current Pattern of Abuse

Soon after introduction for clinical use, there were reports of hydrocodone abuse and addiction. By the 1950s, it was established that hydrocodone has an abuse liability similar to that of morphine. Data regarding the pharmacological effects of hydrocodone and its high potential for abuse were available prior to the enactment of the CSA and the placement of hydrocodone in schedule II reflects that knowledge base. In the United States, popularity of hydrocodone as a drug of abuse increased in the 1990s coinciding with its increased use as an analgesic. Currently HCPs are widely diverted and abused throughout the United States as demonstrated in national and regional drug-abuse-related databases. HCPs and oxycodone products (schedule II) are the two most common opioid analgesic products encountered by law enforcement.

Data from DEA field offices indicate that HCPs are diverted and are among the most sought after licit drugs in every geographic region of the country. DEA case investigations document numerous methods of diversion of HCPs. These methods involve drug theft, doctor shopping, fraudulent oral (call-in) prescriptions, fraudulent prescriptions, diversion by registrants, and various other drug trafficking schemes. HCPs are abused by individuals of diverse ages from adolescents to older populations. According to the NSDUH, in 2012, of the 37 million people in the United States who used pain relievers nonmedically in their lifetime, over 25.6 million (representing 9.9% of the United States population age 12 years or older) reported lifetime nonmedical use of HCPs. The MTF surveys indicate that from 2002 through 2012, 8.1% to 10.5% of high school seniors used Vicodin[supreg], an HCP, for nonmedical purposes. In 2012, the annual prevalence of nonmedical use of Vicodin[supreg] in college students and young adults was 3.8% and 6.3%, respectively.

Several published epidemiological studies indicate that HCPs are widely abused. For example, a published epidemiological study reviewed prescription opioid abuse data collected by drug abuse experts (representatives of the nation's methadone programs, treatment centers, impaired health care professional programs, NIDA grantees and high-prescribing physicians) and found that HCPs are one of the most commonly abused prescription opioid drugs. Rates of abuse, expressed as cases per 100,000 population, were the highest for hydrocodone and extended release oxycodone products, while the rest of the opioid analgesics, including immediate release oxycodone products, had lower rates. Another published epidemiological study also indicates that the rate of intentional exposure (abuse, intentional misuse, suicide or intentional unknown) was highest for HCPs at 3.75 per 100,000 population followed by oxycodone products at 1.81 per 100,000. HCPs were involved in 55% of all of the intentional exposure cases, whereas oxycodone products were involved in 27%. In addition, published data on toxic exposure calls received by Texas poison centers from 1998 through 2009 showed that toxic exposure calls related to ingestion of the combination of HCPs, carisoprodol and alprazolam (commonly referred under street names such as "Holy Trinity," "Houston Cocktail," or "Trio") have increased from 2000 through 2007 with some decline in 2009.

5. The Scope, Duration, and Significance of Abuse

The HHS mentions that abuse of HCPs is considerable and is associated with considerable negative public health impact. The extent of nonmedical use of HCPs by adolescents is higher than for oxycodone products. These data are of significant concern as this may reflect particular risk for younger individuals. The HHS also states that because of the large number of prescriptions, large amounts of HCPs are potentially available for illicit use. Large numbers of adversely affected individuals and the severity of the adverse effects related to abuse of HCPs suggest that individuals are taking these products in amounts sufficient to create a hazard to their health and to the safety of other individuals and the community. Abuse of HCPs is associated with progressively increasing trends in serious adverse effects, including ED visits, admissions for abuse treatment, and in mortality data in selected States. The HHS cites the widespread prescriptions for HCPs as one of the reasons for these adverse outcomes. According to the HHS, data suggests that HCPs have high potential for abuse.

The DEA notes that initial reports of abuse of HCPs in the U.S. were published in the 1960s. Since the 1990s, the diversion and abuse of HCPs has escalated in the country. By the late 1990s, there were large increases in the diversion and abuse of HCPs. HCPs, similar to oxycodone products, are widely diverted and abused pharmaceutical opioid analgesics. HCPs are associated with significant illicit activity and abuse. Federal, State and local forensic laboratory data rank HCPs as one of the two most frequently encountered opioid pharmaceuticals in submissions to the laboratories. For example, in 2012, there were over 34,000 exhibits for HCPs (NFLIS). All DEA field divisions across the U.S. have reported that HCPs are among the most sought after pharmaceuticals.

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In 2012, according to the poison control centers data (NPDS), there were over 29,390 toxic exposures involving HCPs. In 2002, there were over 25,000 DAWN ED visits associated with HCPs and it was ranked sixth among all controlled substances. According to DAWN, the nonmedical use related ED visits for HCPs were 86,258; 95,972; and 82,480 in 2009, 2010, and 2011, respectively. A number of data sources indicate that abuse of HCPs is associated with a large number of deaths. According to NSDUH, there were large numbers of lifetime and past year initiates of HCPs for nonmedical purposes and these numbers exceeded those of oxycodone. According to the MTF, about 8% to 10% of high school seniors reported nonmedical use of Vicodin[supreg], an HCP, in recent years.

DEA case investigations document numerous methods of diversion of HCPs. These methods involve drug theft, doctor shopping, fraudulent oral (call-in) prescriptions, fraudulent prescriptions, diversion by registrants, and various other drug trafficking schemes.

6. What, if Any, Risk There Is to the Public Health

Despite the medical value of HCPs as antitussive and analgesic drugs, the misuse and abuse of these products present numerous risks to the public health. Many of the risk factors associated with these products are common risks shared with other [mu] opioid receptor agonists. These include the risks of developing tolerance, dependence and addiction, and the attendant problems associated with these risks including death. According to the CDC, from 1999 to 2010, the number of drug poisoning deaths \18\ involving any opioid analgesic (e.g., oxycodone, methadone, or hydrocodone) markedly increased (over four-fold), from 4,030 to 16,651, and accounted for 43% of the 38,329 drug poisoning deaths and 39% of the 42,917 total poisoning deaths \19\ in 2010. In 1999, opioid analgesics were involved in 24% of the 16,849 drug poisoning deaths and 20% of the 19,741 total poisoning deaths.

\18\ Drug poisoning deaths include unintentional and intentional poisoning deaths resulting from overdoses of a drug, being given the wrong drug, using the drug in error, or using a drug inadvertently.

\19\ Total poisoning deaths include those resulting from drugs, and those associated with solid or liquid biologics, gases or vapors, or other substances. Poisoning deaths are from all manners, including unintentional, suicide, homicide, and undetermined intent.

The HHS reviewed the HCPs related adverse events that were reported to the FDA Adverse Events Reporting System (FAERS) \20\ from 1969 through 2012 and compared them to those associated with oxycodone products. The most common adverse events reported for HCPs included terms such as complete suicide, intentional overdose, drug abuse, drug dependence, and drug abuser.\21\ The HHS found that both HCPs and oxycodone products are associated with substantial numbers of reports of overdose, suicide, abuse, and dependence reports. Both products have large numbers of adverse events reported that reflect abuse, misuse and injury due to inappropriate use. HCPs had fewer such reports than oxycodone products.

\20\ FAERS is a computerized information database designed to support FDA's surveillance program for the post-marketing safety of all drug and therapeutic biologic products. FDA receives adverse drug reaction reports from manufacturers as required by regulation. Health care professionals and consumers voluntarily submit reports through the MedWatch program. All reported adverse terms are coded according to standardized international terminology, MedDRA (the Medical Dictionary for Regulatory Activities). These numbers are crude reports and may include duplicates. These reports were not individually reported to determine the association between the drug and the adverse event reported and may contain concomitant use of other medications.

\21\ The top 20 most frequently reported adverse event terms associated with all hydrocodone reports (a report may contain more than one adverse event) received from 1969 to 2012 in the FAERS, in decreasing frequency, were: Completed suicide, overdose, cardio-respiratory arrest, toxicity to various agents, cardiac arrest, respiratory arrest, drug ineffective, intentional overdose, nausea, intentional drug misuse, vomiting, death, drug abuse, accidental overdose, pain, dizziness, medication error, drug dependence, headache, and drug abuser.

According to the DAWN, ED mentions associated with HCPs and oxycodone products are the highest among all opioid analgesics suggesting that both HCPs and oxycodone products have a great adverse risk to the public health. According to the HHS, DAWN ME data for five States from 2004 through 2010 reported an increase of 63% and 133% in deaths related to HCPs and oxycodone products, respectively. According to the FDLE, HCPs have been associated with large numbers of deaths in Florida in recent years. According to the NPDS annual reports, since 2002, annual figures for toxic exposures (within the category of opioid analgesic drugs) were the largest for HCPs, followed by oxycodone products (see summary of Factor 1 above). From 2006 through 2012, NPDS reported a total of 84,798 single substance exposures related to HCPs resulting in 195 deaths. The corresponding data for oxycodone products is 57,219 exposures and 173 deaths.

7. Its Psychic or Physiological Dependence Liability

According to the HHS, data from animal and human studies indicate the dependence potential of hydrocodone. The severe dependence potential is reflected by the number of individuals admitted to addiction treatment centers citing HCPs as their substance of abuse. The HHS also states that the treatment admissions linked to abuse of HCPs are increasing. The HHS concluded that abuse of HCPs may lead to severe psychological or physical dependence.

The DEA notes that as evident from the NSDUH data from 2002 through 2006, the propensity of the lifetime users of HCPs to develop substance use disorders on any pain relievers is higher than that of lifetime users of any pain relievers, as well as lifetime users of oxycodone products other than OxyContin[supreg] (i.e., oxycodone immediate release single-entity products and immediate release combination products). The FAERS data (from 1969 through August 28, 2008) indicate that the abuse and dependence reports associated with HCPs expressed as a percentage of all its adverse events (13.3%) were similar (both in magnitude and temporal distribution) to that for oxycodone products other than OxyContin[supreg] (13.6%).

The DEA also notes that according to several published epidemiological surveys and retrospective review of medical records of addiction treatment populations, HCPs are among the most abused opioid pharmaceuticals in prescription opioid dependent individuals in the country and are frequently mentioned as the primary drug of abuse in these subjects.

The above data collectively indicate that HCPs, similar to oxycodone products, have high potential to cause severe psychological or physiological dependence.

8. Whether the Substance Is an Immediate Precursor of a Substance Already Controlled Under the CSA

HCPs are not immediate precursors of a substance already controlled under the CSA, as defined in **21 U.S.C. 811** (e).

Conclusion

Based on consideration of the scientific and medical evaluation and accompanying recommendation of the HHS, and based on the DEA's consideration of its own eight-factor analysis, the DEA finds that these facts and all other relevant data constitute substantial evidence of high potential for abuse of HCPs. As such, the DEA hereby proposes to transfer HCPs from

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schedule III to schedule II under the CSA.

Proposed Determination of Appropriate Schedule

The CSA outlines the findings required to transfer a drug or other substance between schedules (I, II, III, IV, or V) of the CSA. **21 U.S.C. 811** (a); **21 U.S.C. 812** (b). After consideration of the analysis and rescheduling recommendation of the Assistant Secretary for Health of the HHS and review of available data, the Administrator of the DEA, pursuant to 21 U.S.C. 811(a) and 21 U.S.C. 812(b)(2), finds that:

1. HCPs have a high potential for abuse similar to that of schedule II substances;
2. HCPs have a currently accepted medical use in treatment in the United States. According to the HHS, several pharmaceutical products containing hydrocodone in combination with acetaminophen, aspirin, NSAIDs, and homatropine are approved by FDA for use as analgesics for pain relief and for the symptomatic relief of cough and upper respiratory symptoms associated with allergies and colds; and
3. Abuse of HCPs may lead to severe psychological or physical dependence similar to that of schedule II substances.

Based on these findings, the Administrator of the DEA concludes that HCPs warrant control in schedule II of the CSA. **21 U.S.C. 812** (b)(2).

Requirements for Handling HCPs

If this rule is finalized as proposed, persons who handle HCPs would be subject to the CSA's schedule II regulatory controls and administrative, civil, and criminal sanctions applicable to the manufacture, distribution, dispensing, importing, exporting, research, and conduct of instructional activities, including the following:

Registration. Any person who handles (manufactures, distributes, dispenses, imports, exports, engages in research, or conducts instructional activities with) HCPs,

or who desires to handle HCPs, would be required to be registered with the DEA to conduct such activities pursuant to **21 U.S.C. 822, 823, 957, 958**, and in accordance with **21 CFR parts 1301 and 1312**.

Security. HCPs would be subject to schedule II security requirements and would need to be handled and stored pursuant to 21 U.S.C. **821, 823, 871(b)** and in accordance with **21 CFR 1301.71-1301.93**.

Labeling and Packaging. All labels and labeling for commercial containers of HCPs would need to comply with 21 U.S.C. **825, 958(e)**, and be in accordance with **21 CFR part 1302**.

Quotas. A quota assigned pursuant to **21 U.S.C. 826** and in accordance with **21 CFR part 1303** would be required in order to manufacture HCPs.

Inventory. Any person who becomes registered with the DEA after the effective date of the final rule would be required to take an initial inventory of all stocks of controlled substances (including HCPs) on hand on the date the registrant first engages in the handling of controlled substances, pursuant to **21 U.S.C. 827, 958**, and in accordance with **21 CFR 1304.03, 1304.04, and 1304.11(a) and (b)**.

After the initial inventory, every DEA registrant would be required to take a new inventory of all stocks of controlled substances on hand every two years, pursuant to **21 U.S.C. 827, 958**, and in accordance with **21 CFR 1304.03, 1304.04, and 1304.11**.

Records. Every DEA registrant would be required to maintain records with respect to HCPs pursuant to **21 U.S.C. 827, 958**, and in accordance with **21 CFR parts 1304, 1307, and 1312**.

Reports. Every DEA registrant would be required to submit reports regarding HCPs to the Automation of Reports and Consolidated Order System (ARCOS) pursuant to **21 U.S.C. 827** and in accordance with **21 CFR 1304.33**.

Orders for HCPs. Every DEA registrant who distributes HCPs would be required to comply with order form requirements, pursuant to **21 U.S.C. 828**, and in accordance with **21 CFR part 1305**.

Prescriptions. All prescriptions for HCPs would need to comply with **21 U.S.C. 829**, and would be required to be issued in accordance with **21 CFR part 1306, and part 1311 subpart C**.

Importation and Exportation. All importation and exportation of HCPs would need to be in compliance with **21 U.S.C. 952, 953, 957, 958**, and in accordance with **21 CFR part 1312**.

Liability. Any activity involving HCPs not authorized by, or in violation of, the CSA, would be unlawful, and may subject the person to administrative, civil, and/or criminal sanctions.

Regulatory Analyses

Executive Orders 12866 and 13563

In accordance with **21 U.S.C. 811(a)**, this proposed scheduling action is subject to formal rulemaking procedures performed "on the record after opportunity for a hearing," which are conducted pursuant to the provisions of 5 U.S.C. 556 and 557. The CSA sets forth the procedures and criteria for scheduling a drug or other substance. Such actions are exempt from review by the Office of Management and Budget (OMB) pursuant to Section 3(d)(1) of Executive Order 12866 and the principles reaffirmed in Executive Order 13563.

Executive Order 12988

This proposed regulation meets the applicable standards set forth in sections 3(a) and 3(b)(2) of Executive Order 12988 Civil Justice Reform to eliminate drafting errors and ambiguity, minimize litigation, provide a clear legal standard for affected conduct, and promote simplification and burden reduction.

Executive Order 13132

This proposed rulemaking does not have federalism implications warranting the application of Executive Order 13132. The proposed rule does not have substantial direct effects on the States, on the relationship between the national government and the States, or the distribution of power and responsibilities among the various levels of government.

Executive Order 13175

This proposed rule does not have tribal implications warranting the application of Executive Order 13175. It does not have substantial direct effects on one or more Indian tribes, on the relationship between the Federal Government and Indian tribes, or on the distribution of power and responsibilities between the Federal Government and Indian tribes.

Regulatory Flexibility Act

The Administrator, in accordance with the Regulatory Flexibility Act (5 U.S.C. 601-612) (RFA), has reviewed this proposed rule, and by approving it, certifies that it will not have a significant economic impact on a substantial number of small entities. The purpose of this proposed rule is to place HCPs into schedule II of the CSA. No less restrictive measures (i.e., non-control or control in a lower schedule) would enable the DEA to meet its statutory obligation under the CSA.

HCPs are widely prescribed drugs for the treatment of pain and cough suppression. Handlers of HCPs primarily include manufacturers, distributors, exporters, pharmacies, practitioners, mid-level practitioners, and hospitals/clinics.\22\ It is possible

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that other registrants, such as importers, researchers, analytical labs, teaching institutions, etc., also handle HCPs. However, based on its understanding of its registrant population, the DEA assumes for purposes of this analysis that for all business activities other than manufacturers, distributors, exporters, pharmacies, practitioners, mid-level practitioners, and hospitals/clinics, that the volume of HCPs handled is nominal, and therefore de minimis to the economic impact determination of this proposed rescheduling action.

\22\ For purposes of performing regulatory analysis, the DEA uses the definition of a "practitioner" as a physician, veterinarian, or other individual licensed, registered, or otherwise permitted, by the United States or the jurisdiction in which he/she practices, to dispense a controlled substance in the course of professional practice, but does not include a pharmacist, pharmacy, or hospital (or other person other than an individual).

Because HCPs are so widely prescribed, for the purposes of this analysis, the DEA conservatively assumes all distributors, exporters, pharmacies, practitioners, mid-level practitioners, and hospitals/clinics currently registered with the DEA to handle schedule III controlled substances are also handlers of HCPs. The DEA estimated the number of manufacturers and exporters handling HCPs directly from DEA records. In total, the DEA estimates that nearly 1.5 million controlled substance registrations, representing approximately 376,189 entities, would be affected by this rule.

The DEA does not collect data on company size of its registrants. The DEA used DEA records and multiple subscription-based and public data sources to relate the number of registrations to the number of entities and the number of entities that are small entities. The DEA estimates that of the 376,189 entities that would be affected by this rule, 366,351 are "small entities" in accordance with the RFA and Small Business Administration size standards. 5 U.S.C. 601(6); 15 U.S.C. 632.\23\

\23\ The estimated break-down is as follows: 50 manufacturers, 4 exporters, 683 distributors, 50,774 pharmacies, and 314,840 practitioners/mid-level practitioners/hospitals/clinics.

The DEA examined the registration, security (including storage), labeling and packaging, quota, inventory, recordkeeping and reporting, ordering, prescribing, importing, exporting, and disposal requirements for the 366,351 small entities estimated to be affected by the proposed rule. The DEA estimates that only the physical security requirements will have material economic impact and such impacts will be limited to manufacturers, exporters, and distributors. Many manufacturers and exporters are likely to have sufficient space in their existing vaults to accommodate HCPs. However, the DEA understands that some manufacturers, exporters, and distributors will need to build new vaults or expand existing vaults to store HCPs in compliance with schedule II controlled substance physical security requirements. Due to the uniqueness of each business, the DEA made assumptions based on research and institutional knowledge of its registrant community to quantify the costs associated with physical security requirements for manufacturers, exporters and distributors.

The DEA estimates there will be significant economic impact on 1 (2.0%) of the affected 50 small business manufacturers, and 54 (7.9%) of the affected 683 small business distributors. The DEA estimates no significant impact on the remaining affected 4 small business exporters, 50,774 small business pharmacies, or 314,840 small business practitioners/mid-level practitioners/hospitals/clinics. In summary, 55 of the 366,351 (0.015%) affected small entities are estimated to experience significant impact, (i.e., incur costs greater than 1% of annual revenue) if the proposed rule were finalized. The percentage of small entities with significant economic impact is below the 30% threshold for all registrant business activities. The DEA's assessment of economic impact by size category indicates that the proposed rule will not have a significant effect on a substantial number of these small entities.

The DEA's assessment of economic impact by size category indicates that the proposed rule to reschedule HCPs as schedule II controlled substances will not have a significant economic impact on a substantial number of small entities. The DEA will consider written comments regarding the DEA's economic analysis of the impact of such rescheduling, including this certification, and requests that commenters describe the specific nature of any impact on small entities and provide empirical data to illustrate the extent of such impact.

Unfunded Mandates Reform Act of 1995

On the basis of information contained in the "Regulatory Flexibility Act" section above, the DEA has determined and certifies pursuant to the Unfunded Mandates Reform Act (UMRA) of 1995 (2 U.S.C. 1501 et seq.), that this action would not result in any Federal mandate that may result "in the expenditure by State, local, and tribal governments, in the aggregate, or by the private sector, of \$100,000,000 or more (adjusted for inflation) in any one year * * *." Therefore, neither a Small Government Agency Plan nor any other action is required under provisions of the UMRA of 1995.

Paperwork Reduction Act of 1995

This action does not impose a new collection of information requirement under the Paperwork Reduction Act of 1995 (44 U.S.C. 3501-3521). This action would not impose recordkeeping or reporting requirements on State or local governments, individuals, businesses, or organizations. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

List of Subjects in 21 CFR Part 1308

Administrative practice and procedure, Drug traffic control, Reporting and recordkeeping requirements.

For the reasons set out above, 21 CFR part 1308 is proposed to be amended to read as follows:

PART 1308--SCHEDULES CONTROLLED SUBSTANCES

- 1. The authority citation for **21 CFR part 1308** continues to read as follows:

Authority: **21 U.S.C. 811, 812, 871** (b) unless otherwise noted.

Sec. 1308.13 [Amended]

- 2. Amend **Sec. 1308.13** by removing paragraphs (e)(1)(iii) and (iv) and redesignating paragraphs (e)(1)(v) through (viii) as (e)(1)(iii) through (v), respectively.

Dated: February 21, 2014.

Michele M. Leonhart,
Administrator.

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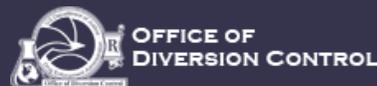
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#D2 2014 Legislative Update

- Missouri Lawmakers Propose Reforms to Distorted Pharmacy Reimbursement System That Endangers Patient Care

SECTION E – OPEN

#E1 Licensees Presently Under Discipline

- Pharmacists
- Pharmacy Interns
- Pharmacies
- Drug Distributors
- Pharmacy Technicians – Conditional Registration
- Pharmacy Technicians – Employment Disqualification List

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
029838/Albers, Douglas C	2006-006518	Revoked	05/28/2008 05/27/2015
	Revocation of license, cannot reapply for seven (7) years. Pled guilty to two class E felonies of knowingly selling a counterfeit drug and knowingly selling a misbranded drug. Section 338.065, RSMo.		
045332/Alvey, Steven H	2009-001614	Suspension	04/19/2010 05/18/2010
	Suspended for thirty (30) days, followed by Probation for five (5) years. Violation of previous discipline, failed to inform employer of discipline, failed to submit compliance reports to the Board, and failed to cause a report of ongoing treatment evaluation to the Board from his Board-approved chemical dependency professional. Section 338.055.2(5), (6), and (13), RSMo.		
	2009-001614	Probation	05/19/2010 05/18/2015
	Suspended for thirty (30) days, followed by Probation for five (5) years. Violation of previous discipline, failed to inform employer of discipline, failed to submit compliance reports to the Board, and failed to cause a report of ongoing treatment evaluation to the Board from his Board-approved chemical dependency professional. Section 338.055.2(5), (6), and (13), RSMo.		
044678/Bae, Sung Y	2010-002650	Probation	03/20/2012 03/19/2015
	Probation for three (3) years. While pharmacist-in-charge, misbranding by overfilling stock bottles, dispensing adulterated drug products, failed to maintain complete controlled substance inventories, prescriptions processed by technician without a pharmacist on duty, allowed unlicensed personnel independent access to pharmacy, recordkeeping violations, and failed to supervise pharmacy personnel to assure compliance with laws/regulations. Section 338.055.2(5), (6), (10), (13), and (15), RSMo.		
2005033291/Baehr, Jennifer L	2011-000615	Suspension	12/02/2011 12/01/2012
	Suspension for one (1) year followed by Probation for five (5) years. While pharmacist-in-charge, misappropriated controlled substances from employer for personal use, impaired pharmacist, and pled guilty to Class C felony. Section 338.055.2(1), (2), (5), (6), (13), (15), and (17), RSMo.		
	2011-000615	Probation	12/02/2012 12/01/2017
	Suspension for one (1) year followed by Probation for five (5) years. While pharmacist-in-charge, misappropriated controlled substances from employer for personal use, impaired pharmacist, and pled guilty to Class C felony. Section 338.055.2(1), (2), (5), (6), (13), (15), and (17), RSMo.		
1999141844/Baker, Jodie Jane	2008-002271	Probation	02/07/2012 02/06/2015
	Probation for three (3) years. As pharmacist-in-charge, relapsed on alcohol and sought alcohol abuse treatment; and allowed technicians to assist in the practice of pharmacy without proper supervision. Section 338.055.2(5) and (13), RSMo.		
028642/Ballard, Bruce D	2007-004649	Probation	04/19/2010 04/18/2015
	Probation for five (5) years. Misappropriated and dispensed Ibuprofen 400mg to a store employee in an unlabeled prescription bottle, removed four tablets of controlled substances and other prescription medications from the pharmacy, while on duty as a pharmacist tested positive for Hydrocodone without a valid prescription. Section 338.055.2(5), (13), (15), and (17), RSMo.		
040958/Barnes, Jeffrey C	2004-006460	Suspension	03/11/2008 03/10/2010
	Two (2) years suspension, followed by five (5) years probation. 8/06 found guilty of one (1) count of felony stealing by deceit of at least five hundred dollars, and thirteen (13) felony counts of causing to be made a false statement to receive health care payments. Section 338.065, RSMo.		
	2004-006460	Probation	03/11/2010 03/10/2015
	Two (2) years suspension, followed by five (5) years probation. 8/06 found guilty of one (1) count of felony stealing by deceit of at least five hundred dollars, and thirteen (13) felony counts of causing to be made a false statement to receive health care payments. Section 338.065, RSMo.		
027046/Bastean, Donald J	2007-001401	Probation	04/15/2009 04/14/2014
	Probation for five (5) years. Disciplined under Section 338.055.2(5) and (13), RSMo for committing misconduct and violating a professional trust or confidence while practicing at a pharmacy.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
045170/Beckett, Abbey C	2011-002794	Suspension	03/28/2012 04/26/2012
	Suspended for thirty (30) days followed by Probation for five (5) years. As pharmacist-in-charge, misappropriated controlled substances from pharmacy for personal use, forged controlled substance prescriptions, failed to timely file loss reports, and entered deferred prosecution agreement regarding charges of Possession of a Controlled Substance, Stealing a Controlled Substance, and Fraudulently Attempting to Obtain a Controlled Substance. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo		
	2011-002794	Probation	04/27/2012 04/26/2017
	Suspended for thirty (30) days followed by Probation for five (5) years. As pharmacist-in-charge, misappropriated controlled substances from pharmacy for personal use, forged controlled substance prescriptions, failed to timely file loss reports, and entered deferred prosecution agreement regarding charges of Possession of a Controlled Substance, Stealing a Controlled Substance, and Fraudulently Attempting to Obtain a Controlled Substance. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo		
2004034219/Bell, Crystal L	2007-004441	Suspension	03/15/2011 04/14/2011
	One (1) month suspension followed by four (4) years probation. Filled and refilled unauthorized controlled substance prescriptions. Section 338.055.2(5), (6), (13), and (15), RSMo Cum. Supp. 2009.		
	2007-004441	Probation	04/15/2011 04/14/2015
	One (1) month suspension followed by four (4) years probation. Filled and refilled unauthorized controlled substance prescriptions. Section 338.055.2(5), (6), (13), and (15), RSMo Cum. Supp. 2009.		
028754/Berding, Dennis J	2009-003351	Suspension	01/01/2011 12/31/2011
	Suspension for one (1) year followed by probation for five (5) years. Violation of discipline involving failure to timely take and pass jurisprudence exam, and engaged in the practice of pharmacy while his pharmacist license was suspended. Section 338.055.2(5) and (6), RSMo.		
	2009-003351	Probation	01/01/2012 12/31/2016
	Suspension for one (1) year followed by probation for five (5) years. Violation of discipline involving failure to timely take and pass jurisprudence exam, and engaged in the practice of pharmacy while his pharmacist license was suspended. Section 338.055.2(5) and (6), RSMo.		
043330/Berger, Randall M	2008-007505	Suspension	02/25/2011 02/24/2014
	Suspension for three (3) years, followed by probation for five (5) years. As pharmacist-in-charge, misappropriated controlled substances from employer and sold them to other individuals; pled guilty to one felony count of conspiring, combining, confederate and agreeing with other persons known and unknown, to distribute hydrocodone. Section 338.055.2(2), (5), (13), and (15), RSMo.		
	2008-007505	Probation	02/25/2014 02/24/2019
	Suspension for three (3) years, followed by probation for five (5) years. As pharmacist-in-charge, misappropriated controlled substances from employer and sold them to other individuals; pled guilty to one felony count of conspiring, combining, confederate and agreeing with other persons known and unknown, to distribute hydrocodone. Section 338.055.2(2), (5), (13), and (15), RSMo.		
040892/Bowser, Sandra K	2012-000375	Suspension	12/04/2012 01/03/2013
	Suspension for thirty (30) days followed by Probation for three (3) years. Misappropriated controlled substances from employer for personal consumption without a prescription. Section 338.055.2(5), (13), (15) and (17), RSMo.		
	2012-000375	Probation	01/04/2013 01/03/2016
	Suspension for thirty (30) days followed by Probation for three (3) years. Misappropriated controlled substances from employer for personal consumption without a prescription. Section 338.055.2(5), (13), (15) and (17), RSMo.		
2011025270/Bresee, Eric T	2011-002343	Probation	08/22/2011 08/21/2016
	Restricted license issued on probation for five (5) years. Addicted to alcohol. Section 338.055.2(1) and (15), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
027483/Buntin, William R	2011-002696	Suspension	07/01/2012 09/30/2012
	Suspended for three (3) months followed by Probation for five (5) years. While pharmacist-in-charge, violation of discipline involving outdated drugs in pharmacy, controlled substance not included in controlled substance inventory, failure to timely respond to inspection compliance notice, compounding log and product label did not contain active/therapeutic ingredients for a compounded product, expired license displayed, sold pseudoephedrine products without a current Methamphetamine Epidemic Self-Certification, failed to maintain updated electronic record of controlled substance shipments. Section 338.055.2(5), (6), (13), and (15), RSMo.		
	2011-002696	Probation	10/01/2012 09/30/2017
	Suspended for three (3) months followed by Probation for five (5) years. While pharmacist-in-charge, violation of discipline involving outdated drugs in pharmacy, controlled substance not included in controlled substance inventory, failure to timely respond to inspection compliance notice, compounding log and product label did not contain active/therapeutic ingredients for a compounded product, expired license displayed, sold pseudoephedrine products without a current Methamphetamine Epidemic Self-Certification, failed to maintain updated electronic record of controlled substance shipments. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2008027465/Casey, Lauren S	2011-006147	Suspension	04/02/2013 05/01/2013
	Suspension for thirty (30) days followed by Probation for three (3) years. Filled and dispensed fraudulent controlled substance prescriptions for personal consumption. Section 338.055.2(5), (13), (15), and (17), RSMo.		
	2011-006147	Probation	05/02/2013 05/01/2016
	Suspension for thirty (30) days followed by Probation for three (3) years. Filled and dispensed fraudulent controlled substance prescriptions for personal consumption. Section 338.055.2(5), (13), (15), and (17), RSMo.		
043867/Cave, James L	2008-000605	Revoked	10/06/2009 10/05/2014
	Revoked, cannot reapply for five (5) years. Disciplinary action in another state based on taking prescription drugs without a prescription from employer. Section 338.055.2(8), RSMo.		
2008029245/Conley, Brad M	2011-002327	Voluntary Surrender	02/12/2013 02/12/2016
	Voluntary surrender and cannot reapply for three (3) years. Violation of discipline involving failure to provide copy of discipline order to employer; failure to submit compliance reports; failure to comply with drug testing program requirements; submitted diluted urine samples; failure to comply with alcohol/drug abuse treatment program requirements; and worked as a pharmacist-in-charge without prior approval of the Board.		
044686/Crader, Jodi L	2010-004854	Suspension	10/13/2011 07/12/2012
	Suspended for nine (9) months followed by probation for five (5) years. Operated a vehicle while under the influence of drugs, practiced pharmacy while impaired, abused controlled and non-controlled drugs by taking the medications more frequently than prescribed, and had same drug filled on same day at two different pharmacies. Section 338.055.2(1), (5), (13), (15), and (17), RSMo		
	2010-004854	Probation	07/13/2012 07/12/2017
	Suspended for nine (9) months followed by probation for five (5) years. Operated a vehicle while under the influence of drugs, practiced pharmacy while impaired, abused controlled and non-controlled drugs by taking the medications more frequently than prescribed, and had same drug filled on same day at two different pharmacies. Section 338.055.2(1), (5), (13), (15), and (17), RSMo		
041690/Dimaio, Thomas G	2005-004071	Revoked	06/17/2008 06/16/2015
	Revoked, cannot reapply for seven (7) years. Diversion and personal use of controlled substances not prescribed by an authorized health care prescriber to an extent that it impaired his ability to perform the work of a pharmacist. Section 338.055.2(1), (5) for incompetence, misconduct, and dishonesty, (6), (13), (15), and (17), RSMo.		
044808/Dixon, Kristi E	2009-004304	Suspension	12/17/2010 01/16/2011
	Suspension for thirty (30) days, followed by probation for five (5) years. Diversion of controlled substances from employer for personal use, pled guilty to Class C felony stealing. Section 338.055.2(2), (5), (6), (13), (15), and (17), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
044808/Dixon, Kristi E	2009-004304	Probation	01/17/2011 01/16/2016
	Suspension for thirty (30) days, followed by probation for five (5) years. Diversion of controlled substances from employer for personal use, pled guilty to Class C felony stealing. Section 338.055.2(2), (5), (6), (13), (15), and (17), RSMo.		
041231/Dryden, Steven W	2009-001542	Probation	07/01/2013 06/30/2018
	Probation for five (5) years. Alcohol and controlled substance abuse, misappropriation of controlled substances. Section 338.055.2(1), (6), (13), (15), and (17), RSMo.		
2013002238/Forrester, Peter A	2011-006708	Probation	01/23/2013 01/22/2018
	Restricted license issued on probation for five (5) years. Disciplinary action in other states involving refill of prescriptions for controlled substances without authorization and failure to maintain required records. Section 338.055.2(8) and (15), RSMo.		
040988/Gavan, Derk C	2007-000388	Revoked	06/11/2007 06/10/2014
	Pharmacist license revoked, cannot reapply for seven (7) years. Violation of previous disciplinary order. Failed to attend approved counseling, failed to provide a copy of his settlement agreement to employers within five business days, did not abstain from controlled substances unless prescribed by a physician in the state of Missouri, and did not tell health care professionals of his chemical dependency. Section 338.055.2(1)(5)(6)(13)(15)and (17), RSMo 2000		
042203/Gravatt, Michael C	2005-006914	Probation	09/12/2009 09/11/2014
	Probation for five (5) years. Possessed and consumed controlled substances without a current prescription. Section 338.055.2(15) and (17), RSMo.		
044185/Gray, Cristina D	2006-004998	Probation	05/03/2011 05/02/2016
	Probation for five (5) years. Alcohol dependence. Section 338.055.2(1), (5), and (13), RSMo Supp. 2008.		
042363/Gregory, Jeffrey M	2008-001887	Revoked	12/08/2010 12/07/2017
	Pharmacist license revoked and cannot reapply for seven (7) years. Pled guilty to one felony count of Adulteration of a Commercial Product. Section 338.065, RSMo.		
040707/Griggs, Douglas E	2011-000277	Suspension	03/29/2012 09/28/2012
	Suspended for six (6) months followed by Probation for five (5) years. Misappropriated controlled substances from employer for personal use, impaired. Section 338.055.2(5), (6), (13), and (15), RSMo.		
	2011-000277		09/29/2012 09/28/2017
	Suspended for six (6) months followed by Probation for five (5) years. Misappropriated controlled substances from employer for personal use, impaired. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2012011936/Gullette, Steven M	2011-006884	Probation	04/13/2012 11/22/2014
	License issued on Probation till November 22, 2014. Previous discipline on intern license due to admission of theft of controlled substances from employer, impaired. Section 338.055.2(1), (2), (8), (15) and (17), RSMo.		
2011020064/Hall, Colton P	2011-006148	Probation	09/19/2012 09/18/2014
	Probation for two (2) years. Violation of discipline involving administration of influenza vaccine; failed to apprise the Board of current work address/telephone number; failed to provide copy of disciplinary order to employer and failed to obtain and submit written notification acknowledging employer receipt of the order.		

Licenses Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
042861/Hanson, William V	2008-006913	Suspension	10/26/2009 04/25/2010
	Six (6) months suspension followed by five (5) years probation. Pled guilty to one felony count of unlawful acquisition of a controlled substance, and disciplinary action in another state. Section 338.065, RSMo.		
	2008-006913	Probation	04/26/2010 04/25/2015
	Six (6) months suspension followed by five (5) years probation. Pled guilty to one felony count of unlawful acquisition of a controlled substance, and disciplinary action in another state. Section 338.065, RSMo.		
029102/Hemeyer, Jerry D	2008-003603	Suspension	12/17/2009 12/16/2010
	Suspension for one (1) year followed by Probation for five (5) years. Diverted controlled substances without a valid prescription from employer for personal consumption, impaired pharmacist. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
	2008-003603	Probation	12/17/2010 12/16/2015
	Suspension for one (1) year followed by Probation for five (5) years. Diverted controlled substances without a valid prescription from employer for personal consumption, impaired pharmacist. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
029716/Hinson, Donald M	2008-002070	Suspension	12/22/2008 12/14/2009
	Temporary suspension following expedited hearing. Extended use of methamphetamine, unlawful dispensing of controlled substances, and impaired professional judgment demonstrated by these acts constitutes a clear and present danger to patients. Section 338.055, RSMo.		
	2008-002070	Revoked	12/15/2009 12/14/2016
	Revoked, cannot reapply for seven (7) years. Extended use of methamphetamine, unlawful dispensing of controlled substances, and impaired professional judgment demonstrated by these acts constitutes a clear and present danger to patients. Section 338.055.2 (1), (2), (5), (13), (15), and (17), RSMo.		
040431/Hollaway, Daniel J	2008-002040	Suspension	09/12/2012 09/11/2014
	Suspension for two (2) years followed by Probation for five (5) years. As owner and pharmacist-in-charge, misappropriated controlled substances from pharmacy; dispensed controlled substances to himself without a prescription, without proper labeling and without directions. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
	2008-002040	Probation	09/12/2014 09/11/2019
	Suspension for two (2) years followed by Probation for five (5) years. As owner and pharmacist-in-charge, misappropriated controlled substances from pharmacy; dispensed controlled substances to himself without a prescription, without proper labeling and without directions. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
040714/Holman, David B	2009-004610	Probation	03/02/2012 03/01/2015
	Probation for three (3) years. While PIC and pharmacy owner, controlled substance recordkeeping violations, losses of controlled substances, repacked prescription on pharmacy shelf with an expiration date in excess of 12 months, overfilled stock bottles, and schedule II controlled substance on open/active pharmacy shelf. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2000172885/Jarvis, Michael John	2011-006993	Probation	05/31/2013 05/30/2015
	Probation for two (2) years. As pharmacist-in-charge, failed to obtain DEA and BNDD registrations prior to dispensing controlled substances; pharmacy operated as a shared services pharmacy without a Class J license; failed to keep complete acquisition, purchase and distribution records; and improper destruction of controlled substances. Section 338.055.2(5), (6), (13), and (15), RSMo.		
026334/Kammer, M D	2009-004608	Probation	01/19/2012 01/18/2017
	Probation for five (5) years. As pharmacist-in-charge, drugs received from non-wholesale, unlicensed drug distributors; failed to complete DEA CII order forms; prescriptions filled for another pharmacy without Class J license; failed to keep complete acquisition, purchase and distribution records; and CII cabinet not properly locked. Section 338.055.2(5), (6), (10), (13), and (15), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
040031/Kessler, Timothy E	2010-001357	Suspension	06/22/2011 06/21/2013
	Suspension for two (2) years followed by Probation for five (5) years. Misappropriated controlled substances from employer for personal consumption, falsified inventory records to cover up his misappropriation. Section 338.055.2(1), (5), (13), (15) and (17), RSMo.		
	2010-001357	Probation	06/22/2013 06/21/2018
	Suspension for two (2) years followed by Probation for five (5) years. Misappropriated controlled substances from employer for personal consumption, falsified inventory records to cover up his misappropriation. Section 338.055.2(1), (5), (13), (15) and (17), RSMo.		
043358/Kimbel, Craig M	2008-000979	Suspension	04/26/2010 04/25/2013
	Suspension for three (3) years, followed by Probation for five (5) years. Pled guilty to three felony counts of Fraudulently Attempting to Obtain A Controlled Substance. Section 338.065.1, RSMo.		
	2008-000979		04/26/2013 04/26/2018
	Suspension for three (3) years, followed by Probation for five (5) years. Pled guilty to three felony counts of Fraudulently Attempting to Obtain A Controlled Substance. Section 338.065.1, RSMo.		
2005000313/Krieg, Shannon M	2009-004902	Suspension	09/23/2010 03/22/2011
	Six (6) months suspension, followed by five (5) years probation. Misappropriated controlled substances from employer for personal use without a valid prescription, and altered or made incorrect entries in pharmacy's computer system to cover up his misappropriation. Section 338.055.2(2), (5), (6), (13), (15), and (17), RSMo.		
	2009-004902	Probation	03/23/2011 03/22/2015
	Six (6) months suspension, followed by five (5) years probation. Misappropriated controlled substances from employer for personal use without a valid prescription, and altered or made incorrect entries in pharmacy's computer system to cover up his misappropriation. Section 338.055.2(2), (5), (6), (13), (15), and (17), RSMo.		
2008035925/Latham, Michael C	2008-005720	Probation	12/04/2008 11/15/2015
	Restricted license issued on probation for five (5) years. Discipline in another state regarding diversion of controlled substances for personal use and for use by third parties without valid prescriptions, chemically dependent. Section 338.055.1 and .2(1), (8), (15), and (17), RSMo.		
	Did not renew license in 2010, with 1,129 days of Probation remaining. Discipline began again 10/12/2012.		
	2008-005720	Probation	10/12/2012 11/15/2015
	Restricted license issued on probation for five (5) years. Discipline in another state regarding diversion of controlled substances for personal use and for use by third parties without valid prescriptions, chemically dependent. Section 338.055.1 and .2(1), (8), (15), and (17), RSMo.		
	Did not renew license in 2010. Discipline did not run 11/1/2010 to 10/11/2012.		
029882/Lehman, Jack Q	2008-000648	Suspension	03/20/2009 03/19/2010
	One (1) year suspension followed by five (5) years probation. As pharmacist-in-charge, diverted controlled substances from his pharmacy for personal consumption. Section 338.055.2(5), (6), (13), (15), and (17), RSMo.		
	2008-000648	Probation	03/20/2010 03/19/2015
	One (1) year suspension followed by five (5) years probation. As pharmacist-in-charge, diverted controlled substances from his pharmacy for personal consumption. Section 338.055.2(5), (6), (13), (15), and (17), RSMo.		
027646/Magee, Patrick E	2007-005181	Probation	08/02/2012 08/01/2017
	Probation for five (5) years. Tested positive for controlled substances, did not have valid prescription(s), alcohol addiction. Section 338.055.2(5), (13), (15), and (17), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
1999140347/Mai, Michelle H	2006-002418	Suspension	09/24/2009 09/23/2010
	Suspension for one (1) year followed by Probation for five (5) years. Disciplinary action in another state involving processing fictitious prescription claims and prescription refills to submit rebate requests to several pharmaceutical manufacturers and increase the apparent volume of the pharmacy business; pled and was found guilty of felony mail fraud. Section 338.055.2(2), (5), (8), and (13), RSMo.		
	2006-002418	Probation	09/24/2010 09/23/2015
	Suspension for one (1) year followed by Probation for five (5) years. Disciplinary action in another state involving processing fictitious prescription claims and prescription refills to submit rebate requests to several pharmaceutical manufacturers and increase the apparent volume of the pharmacy business; pled and was found guilty of felony mail fraud. Section 338.055.2(2), (5), (8), and (13), RSMo.		
028481/Marsh, Charles Wm	2005-006278	Suspension	01/28/2007 01/27/2010
	Pharmacist licensed suspended for three years, followed immediately by probation for five years. As owner of a pharmacy, Marsh moved that pharmacy and began practicing pharmacy at the new location without notifying the Board of the change of location; the pseudophederine-containing product inventory could not be located; the pharmacy permit was not posted and could not be located; the pharmacy was in violation of drug storage temperature requirements; controlled substance recordkeeping was incomplete; the pharmacy was then sold and as an employee of the new owner, Marsh failed to disclose his disciplinary order to the new owners; failed to comply with a quality assurance performance plan; continued to serve as pharmacist-in-charge without prior approval of the Board, even after notification by the Board that he was in violation of his disciplinary order by doing so;		
	2005-006278	Probation	01/28/2010 01/27/2015
	Pharmacist license suspended for three years, followed immediately by probation for five years. As owner of a pharmacy, Marsh moved that pharmacy and began practicing pharmacy at the new location without notifying the Board of the change of location; the pseudophederine-containing product inventory could not be located; the pharmacy permit was not posted and could not be located; the pharmacy was in violation of drug storage temperature requirements; controlled substance recordkeeping was incomplete; the pharmacy was then sold and as an employee of the new owner, Marsh failed to disclose his disciplinary order to the new owners; failed to comply with a quality assurance performance plan; continued to serve as pharmacist-in-charge without prior approval of the Board, even after notification by the Board that he was in violation of his disciplinary order by doing so. Section 338.055.2(5), (6), (13), and (15) RSMo		
	Violation of previous discipline - see #2004-000367		
029464/Martka, Stanley J	2009-007360	Suspension	11/02/2010 02/01/2011
	Three (3) months suspension followed by five (5) years probation. While pharmacist-in-charge, violation of discipline involving failed potency testing of compounded prescription, use of expired ingredient for compounded prescription, compounding log discrepancies/omissions, allowed technicians to work without current registrations. Section 338.055.2(5), (6), (10), and (13), RSMo.		
	2009-007360	Probation	02/02/2011 02/01/2016
	Three (3) months suspension followed by five (5) years probation. While pharmacist-in-charge, violation of discipline involving failed potency testing of compounded prescription, use of expired ingredient for compounded prescription, compounding log discrepancies/omissions, allowed technicians to work without current registrations. Section 338.055.2(5), (6), (10), and (13), RSMo.		
042760/McIntire, Jefferson J	2006-006644	Revoked	06/01/2009 05/31/2016
	Pharmacist license revoked, cannot reapply for seven (7) years. Court-order found McIntire totally incapacitated and totally disabled. Section 338.055.2(9), RSMo Supp. 2008.		
042307/Mitchell, Brian	2009-001956	Probation	09/06/2011 09/05/2016
	Probation for five (5) years. As pharmacist-in-charge, improper labeling; unauthorized dispensing; altered authorized refills and failed to keep records of number of authorized refills; recordkeeping violations; and failed to supervise pharmacy personnel. Section 338.055.2(5), (6), (13), and (15), RSMo.		
029418/Nippes, Jeffrey K	2012-000064	Revoked	05/31/2013 05/31/2020
	Revoked, cannot reapply for seven (7) years. Impaired pharmacist; misappropriated controlled substances from employer for personal consumption; pled guilty to one count of theft/stealing. Section 338.055.2(1), (2), (5), (13), (15), and (17), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2000148445/Ori, Lee Eric	2007-001712	Probation	01/01/2012 12/31/2014
	Probation for three (3) years. While pharmacist-in-charge, compounded other than pursuant to individual patient prescription; use of unlicensed facility to prepare sterile compounds; misbranded, outdated, and inappropriately maintained drugs; compounded commercially-available products; dispensed sterile products without documented prescriber authorization prior to end-product testing; failed to validate beyond-use dates; compounded without a prescription. Section 338.055.2(6) and (13), RSMo.		
2000148345/Owens, Anthony	2011-002793	Suspension	07/10/2012 08/09/2012
	Suspension for thirty (30) days followed by Probation for five (5) years. Possessed and consumed cocaine. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		
	2011-002793	Probation	08/10/2012 08/09/2017
	Suspension for thirty (30) days followed by Probation for five (5) years. Possessed and consumed cocaine. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		
2012039119/Peckerman, Charles L	2010-007321	Probation	11/16/2012 05/15/2016
	Restricted license issued on probation for three (3) years and six (6) months. Disciplinary action in other states. Section 338.055.2(5), (6), (8) and (13), RSMo.		
2002030800/Peters, Michael T	2005-003671	Revoked	09/01/2007 08/31/2014
	Pharmacist license revoked; cannot reapply for seven years. Failed to retain continuing education certificates as required by regulation. Section 338.055.2(6)		
028950/Plein, Michael A	2005-006712	Suspension	06/01/2009 11/30/2009
	Suspended for six (6) months, followed by probation for five (5) years. Worked as pharmacist-in-charge while under the influence of alcohol, admitted impairment. Section 338.055.2(1), (5), and (13), RSMo.		
	2005-006712	Probation	12/01/2009 11/30/2014
	Suspended for six (6) months, followed by probation for five (5) years. Worked as pharmacist-in-charge while under the influence of alcohol, admitted impairment. Section 338.055.2(1), (5), and (13), RSMo.		
044098/Pollard, William L, Jr	2008-006917	Revoked	10/26/2009 10/25/2016
	Revoked, cannot reapply for seven (7) years. Violation of discipline, tested positive for prescription drugs for which he did not have valid prescriptions, diluted/attempted to dilute urine samples, failed to report to the Board as required, misappropriated controlled substances from employer for personal consumption, created fictitious prescriptions for current patients and then deleted records from the computer system, created and filled controlled substance prescriptions for fictitious patients and then purchased said prescriptions for personal use. Section 338.055.2(5), (6), (13), (15), and (17), RSMo.		
2006035339/Pomaville, Kerri L	2008-003342	Probation	06/02/2012 06/01/2017
	Probation for five (5) years. While pharmacist-in-charge, took prescriptions, including controlled substances, from employer without first paying for them and without following proper release procedures. Section 338.055.2(5), (6), and (13), RSMo.		
2003010532/Poynter, Jonathan Matthew	2008-006426	Probation	07/02/2009 07/01/2014
	Violation of previous discipline regarding failure to timely take and pass law examination, and did not complete internship hours as required. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
041264/Pruett, Joseph L	2010-001380	Probation	12/02/2011 12/01/2014
	Probation for three (3) years. Tested positive on employment drug screen without a valid prescription, pharmacy loss of drug for which he tested positive, impaired pharmacist. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
042629/Reddy, Santosh K	2008-004385	Revoked	12/19/2008 12/18/2015
	Revoked, cannot reapply for seven (7) years. Violation of previous discipline regarding failure to timely renew license and pay licensing fees, did not submit compliance report to Board, and did not take and pass law examination. Section 338.055.2(5), (6), and (13), RSMo.		
041667/Reidy, Shawn P	2006-005847	Revoked	03/29/2007 03/28/2014
	Pharmacist license revoked, cannot reapply for seven (7) years. Second violation of previous discipline. Tested positive for alcohol in drug screen, failed to fully comply with drug testing requirement of probation order, failed to complete an alcohol/drug abuse counseling program as required. Section 338.055.2(6) and (13)		
044501/Reppond, Ralph A	2010-007070	Suspension	03/17/2011 06/14/2011
	Suspension for ninety (90) days followed by Probation for five (5) years. Self reported relapse and theft of controlled substances from employer for personal use. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		
	2010-007070	Probation	06/15/2011 06/14/2016
	Suspension for ninety (90) days followed by Probation for five (5) years. Self reported relapse and theft of controlled substances from employer for personal use. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		
029924/Richardson, Mary R	2013-004480	Revoked	02/28/2014 02/27/2021
	Revoked and cannot reapply for seven (7) years. Violation of discipline regarding failure to comply with Kansas Committee on Impaired Pharmacy Practice program, failure to enroll/activate FirstLab account, failure to submit documentation for a chemical dependency evaluation/program and documentation of support group attendance, and failure to submit compliance reports to the Board. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
028810/Rostie, Mary L	2008-005108	Revoked	12/19/2008 12/18/2015
	Revoked, cannot reapply for seven (7) years. Pled guilty to conspiracy to distribute controlled substances and to conspiracy to commit promotional and concealment money laundering. Section 338.065, RSMo.		
027057/Rucker, Gary R	2003-004232	Revoked	09/01/2007 10/31/2014
	Pharmacist license revoked; cannot reapply for seven years. Refilled one-time prescriptions for controlled substances without valid prescriptions; violated and assisted or enabled a patient to violate the drug laws of Missouri and the federal government in obtaining controlled substances without a valid prescription or authorized refill; failed to maintain proper inventory documentation in violation of Missouri and federal government drug laws or rules and regulations; violated the professional trust or confidence of clients, employers, colleagues and physicians. Section 338.055.2(5), (6), (13) and (15) RSMo		
040056/Russell, Michael L	2011-006873	Probation	01/24/2013 01/23/2016
	Probation for three (3) years. As pharmacist-in-charge, return to stock items not properly handled, not deleted/reversed in computer; failure to sign pharmacist signature log; misbranding; and failure to supervise pharmacy personnel. Section 338.055.2(4), (5), (6), (13), and (15), RSMo		
041385/Satterfield, Ronald D	2012-001910	Probation	06/26/2013 06/25/2018
	Probation for five (5) years. Dispensed legend and controlled substance prescriptions to himself without valid prescriptions, early refills, and misbranding. Section 338.055.2(5), (13), (15), and (17), RSMo.		
042679/Sewell, Walter E	2005-001298	Revoked	03/25/2007 03/24/2014
	Pharmacist license revoked; cannot reapply for licensure for seven years. Pled guilty in a criminal case to felony publishing child pornography and felony distributing child pornography. Section 338.065.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2002022650/Stark, Kristina L	2011-004395	Revoked	03/02/2012 03/02/2019
	Revoked and cannot reapply for seven (7) years. Violation of discipline involving failure to return licenses to Board office, failure to submit 6-month compliance reports, failure to submit to urinalysis testing, failure to complete alcohol/drug treatment program requirements, and failure to obtain mental health evaluation. Section 338.055.2(1), (5), (6), (13), (15), and (17), RSMo.		
028884/Stockstill, Dennis L	2010-002283	Probation	09/06/2011 09/05/2014
	Probation for three (3) years. As pharmacist-in-charge, he and/or pharmacy personnel compounded without proper licensure, equipment or environment; dispensed compounded substances with expired ingredients and in batches that exceeded their beyond use date; maintained deficient compounding logs; compounded two different batches with the same lot number; misbranded and adulterated compounded products; failed to issue a recall of misbranded drugs; failed to supervise personnel to assure compliance with laws/regulations. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2011032868/Thompson, Timothy Eugene	2012-002819	Suspension	02/13/2013 05/13/2013
	Suspension for 90 days followed by Probation for five (5) years. Impaired pharmacist; while pharmacist-in-charge misappropriated controlled substances for personal consumption; pled guilty to misdemeanor DWI-Alcohol. Section 338.055.2(1), (2), (5), (13), (15) and (17), RSMo.		
	2012-002819	Probation	05/14/2013 05/13/2018
	Suspension for 90 days followed by Probation for five (5) years. Impaired pharmacist; while pharmacist-in-charge misappropriated controlled substances for personal consumption; pled guilty to misdemeanor DWI-Alcohol. Section 338.055.2(1), (2), (5), (13), (15) and (17), RSMo.		
2013003613/Tran, Huong Nguyen	2012-007058	Probation	02/01/2013 01/31/2016
	Restricted license issued on Probation for three (3) years. Disciplinary action in other states involving fraudulently obtaining dangerous drugs and pled nolo contendere to misdemeanor theft. Section 338.055.2(8) and (15), RSMo.		
044592/Tyler, Mark P	2007-001369	Revoked	03/11/2008 03/10/2015
	Revoked, cannot reapply for seven (7) years. 8/07 pled guilty to felony stealing a controlled substance. Section 338.065, RSMo.		
042316/Wagenknecht, Mark A	2010-006399	Suspension	03/15/2011 03/14/2013
	Suspension for two (2) years, followed by Probation for five (5) years. Violation of discipline. Chemically dependent, repeatedly failed to call into Board's urinalysis testing program, failed to provide urine samples when requested. Section 338.055.2(1), (5), (6), (13), and (15), RSMo.		
	2010-006399	Probation	03/15/2013 03/14/2018
	Suspension for two (2) years, followed by Probation for five (5) years. Violation of discipline. Chemically dependent, repeatedly failed to call into Board's urinalysis testing program, failed to provide urine samples when requested. Section 338.055.2(1), (5), (6), (13), and (15), RSMo.		
028605/Walker, Michael L	2009-005880	Suspension	09/23/2010 10/22/2010
	Thirty (30) days suspension followed by four (4) years probation. Dispensed prescription for family member in violation of previous discipline, removed his name as verifying pharmacist on the prescription. Section 338.055.2(5) and (13), RSMo.		
	2009-005880	Probation	10/23/2010 10/22/2014
	Thirty (30) days suspension followed by four (4) years probation. Dispensed prescription for family member in violation of previous discipline, removed his name as verifying pharmacist on the prescription. Section 338.055.2(5) and (13), RSMo.		
044753/Welch, Shannon T	2008-001343	Suspension	01/03/2012 07/02/2012
	Suspension for six (6) months followed by Probation for five (5) years. While pharmacist-in-charge, misappropriated controlled substances from employer for personal use without a prescription, impaired pharmacist. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacist

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
044753/Welch, Shannon T	2008-001343	Probation	07/03/2012 07/02/2017
	Suspension for six (6) months followed by Probation for five (5) years. While pharmacist-in-charge, misappropriated controlled substances from employer for personal use without a prescription, impaired pharmacist. Section 338.055.2(1), (5), (13), (15), and (17), RSMo.		
2009030094/Westbay, Chad L	2009-003270	Probation	10/02/2009 10/01/2014
	Restricted license issued on Probation for five (5) years. Previous disciplinary action in Missouri due to impairment. Section 338.055.2(1), (8), (15), and (17), RSMo.		
2000172890/York, Kyle J	2010-002285	Probation	06/22/2011 06/21/2014
	Probation for three (3) years. Compounded sterile products without proper licensure, equipment or environment; prescriptions dispensed from expired compounded drug batches; misbranding; compounding log violations; inappropriate use of lot numbers; compounded substances labeled with expiration dates which exceeded the expiration dates of ingredients. Section 338.055.2(5), (6), (13) and (15), RSMo.		
2005007715/Young-Guffey, Wendy S	2010-007974	Revoked	10/13/2011 10/12/2018
	Revoked and cannot reapply for seven (7) years. Violation of discipline involving expired license, failed to submit compliance reports, failed to comply with urinalysis testing program requirements, failed to take/pass jurisprudence exam, and failed to participate in alcohol/drug and mental health treatment programs. Section 338.055.2(1), (5), (6), (13), and (15), RSMo.		
040072/Younger, David G	2004-003877	Revoked	03/26/2007 03/25/2014
	Pharmacist license revoked; cannot reapply for licensure for seven years. Pled guilty in a criminal case to felony charges of trafficking in drugs in the 1st degree (four counts); distributing drugs near schools, unlawful use of drug paraphernalia, and keeping or maintaining a public nuisance. Section 338.065.		

Licensees Presently Under Disciplinary Order

Pharmacy Intern

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2006001411/Kampschmidt, Luke R			
	2007-006504	Revoked	08/08/2008 08/07/2015
	Intern license revoked and cannot reapply for seven (7) years. Violation of discipline regarding failure to renew license, to make himself available for personal interview, to register for period blood/urinalysis testing, to submit quarterly compliance reports, and to provide chemical dependency evaluation. Section 338.055.2(1), (5), (6), (13), and (15), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacy

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2013019680/Advanced Physician Solutions Inc Advanced Compounding Pharmacy	2012-007424	Probation	01/31/2014 07/07/2018
	Restricted pharmacy permit issued on Probation until July 7, 2018. Disciplinary action in another state regarding numerous violations of California's pharmacy laws and disciplinary action against Advanced's pharmacist-in-charge's pharmacist license regarding sale of compounded drugs to a wholesaler from whom he did not obtain the controlled substance, failed to maintain written policies and procedures for the preparation and dispensing of sterile injectable products, failed to maintain proper and required records of their compounding products, misbranded and labeled drugs with false and misleading information, sold, transferred, purchased, and traded misbranded drugs, and committed acts of misconduct. Section 338.055.1 and .2(8), RSMo.		
2013005750/Advantage Pharmacy, LLC Advantage Pharmacy LLC	2013-000544	Probation	02/22/2013 05/17/2014
	Restricted pharmacy permit issued on Probation until May 17, 2014. Disciplinary action in another state involving record keeping of controlled substances. The records disclosed a controlled substance shortage of 165,000 tablets of hydrocodone and more than 21,000 doses of alprazolam. Section 338.055.2(8), RSMo.		
003570/Center Pharmacy Inc Center Pharmacy	2011-001349	Probation	08/04/2011 08/03/2016
	Probation for five (5) years. Violation of discipline regarding controlled substance prescriptions possessed and dispensed while BNDD registration was expired, improper documentation of transfer of controlled substances, cluttered pharmacy. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2009008060/Missouri CVS Pharmacy LLC CVS Pharmacy #5645	2010-005376	Probation	05/22/2012 05/21/2014
	Probation for two (2) years. Technician theft of controlled substances from pharmacy, did not provide adequate security of controlled substances. Section 338.055.2(6) and (15), RSMo.		
2006017639/Missouri CVS Pharmacy LLC CVS Pharmacy #8607	2011-004241	Probation	09/20/2012 09/19/2015
	Probation for three (3) years. Losses of controlled substances, failed to protect against loss of controlled substances and diversion, failed to maintain adequate security over its controlled substance inventory. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2014002635/Entirelypets Pharmacy LLC Entirelypets Pharmacy LLC	2013-004667	Probation	01/28/2014 10/21/2017
	Restricted pharmacy permit issued on Probation until October 21, 2017. Disciplinary action in another state regarding practicing without a permit to do so and had dispensed prescription drugs to consumers without a good faith veterinarian examination. Section 338.055.2(8), RSMo.		
2000157562/Missouri Baptist Medical Center Family Care Pharmacy	2010-007073	Probation	09/11/2012 09/10/2014
	Probation for two (2) years. Failed to maintain adequate security to deter theft of drugs by personnel or the public, failed to monitor controlled substances inventory, failed to properly store controlled substances, failed to assure pharmacy procedures for handling/dispensing of controlled substances are in compliance with state/federal laws, and failed to properly supervise pharmacy personnel. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2009031072/KRS Global Biotechnology, Inc GBT Rx	2010-004281	Probation	01/22/2013 01/21/2015
	Probation for two (2) years. Compounded drugs shipped as office stock with no patient-specific prescriptions, improper labeling, and misbranding by unauthorized dispensing of legend drugs. Section 338.055.2(5), (6), (13), (15), RSMo.		
2014002930/National Prescription Services Inc HRI Pharmacy	2013-003215	Probation	01/29/2014 01/28/2017
	Restricted pharmacy permit issued on Probation for three (3) years. Disciplinary action in other states against pharmacist-in-charge's pharmacist license regarding felony conviction for attempted embezzlement, misdemeanor conviction for attempted theft. Section 338.055.2(2) and (8), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacy

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
002576/Jack W Monroe Pharmacy Inc Jack W Monroe Pharmacy Inc	2011-004113	Probation	01/24/2013 01/23/2016
	Probation for three (3) years. Return to stock items not properly handled, not deleted/reversed in computer; failure to sign pharmacist signature log; and misbranding. Section 338.055.2(4), (5), (6), (13), and (15), RSMo.		
2013015407/M. D. Pharmacy Inc M D Pharmacy Inc	2013-003406	Probation	10/25/2013 09/27/2014
	Permit issued on Probation until September 27, 2014. Previous permit was on probation. Received drugs from non-wholesale, unlicensed drug distributors; misbranding by overfilling stock bottles; compounded prescriptions not logged; failed to maintain hard copies of controlled substance prescriptions; failed to complete CII order forms; filled prescriptions for another pharmacy without a Class J license; recordkeeping violations; drug security violations; technician allowed to work and dispense without a pharmacist on duty, and counsel patients; and allowed live animal in pharmacy. Section 338.055.2(5), (6), (10), (13), and (15), RSMo.		
006016/General Store No. Two Inc., The Marshs Sun Fresh	2007-006503	Probation	05/30/2009 05/29/2014
	Permit on probation for five (5) years. Pharmacy entered contract whereby controlled and non-controlled substances were dispensed based on telephonic or computer-based questionnaires, and where no bona fide physician-patient relationship existed. Section 338.055.2(5), (6), (13), and (15), RSMo.		
005742/Reddy Drug Inc Medicine Shoppe	2008-004386	Revoked	12/19/2008 12/18/2015
	Revoked, cannot reapply for seven (7) years. Violation of previous discipline regarding failure to retain a pharmacy consultant, failure to use compendia grade ingredients and failed to maintain a certificate of analysis, had repackaged and prepackaged drugs not properly labeled in the pharmacy, expired drugs in inventory, failed to maintain log or invoice of receipt of active shelf stock from another pharmacy, failed to log compounded prescription, failed to properly receive controlled substances, failed to list active therapeutic ingredients on a patient's compounded prescription container, failed to take the required change of pharmacist-in-charge controlled substance inventory, compounded prescriptions returned to stock without assigning batch numbers and beyond use dates on the container and log. Section 338.055.2(5), (6), and (13), RSMo.		
2005035753/Arcadia Ego, Inc. Mitchell Pharmacy	2009-007407	Probation	09/06/2011 09/05/2014
	Probation for three (3) years. Improper labeling; unauthorized dispensing; altered authorized refills and failed to keep records of number of authorized refills; and recordkeeping violations. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2013019681/Pharmacy Corporation of America PharMerica	2013-001441	Probation	06/19/2013 06/18/2016
	Restricted pharmacy permit issued on Probation for three (3) years. Disciplinary action in another state regarding diversion of controlled substances and failure to provide proper oversight to prevent diversion. Section 338.055.2(8), RSMo.		
2010027418/Rx.com Partners LP Rx.com	2009-007368	Probation	10/19/2010 10/18/2014
	Pharmacy permit issued on Probation for four (4) years. Operated without a valid Missouri permit. Section 338.055.2(6), RSMo.		
2001025925/Target Corporation Target Pharmacy T-1388	2011-004243	Probation	12/01/2012 11/30/2015
	Probation for three (3) years. Loss of controlled substances, failed to provide adequate security to guard against theft and diversion of controlled substances by personnel. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2005030727/Target Stores a Division of Target Corp. Target Pharmacy T-1515	2010-004260	Probation	02/22/2012 02/21/2017
	Probation for five (5) years. Loss of controlled substances and failed to provide adequate security controls to prevent employee theft of controlled substances. Section 338.055.2(5), (6), (13), and (15), RSMo.		

Licensees Presently Under Disciplinary Order

Pharmacy

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2001019642/Rostie Enterprises, LLC The Medicine Shoppe	2005-006704	Revoked	01/07/2013 01/06/2020
	Revoked and cannot reapply for seven (7) years. Pharmacist-in-charge/owner participated in scheme whereby excessive, suspicious, unsigned controlled substance prescriptions faxed from an agent of out-of-state physicians were dispensed for cash. Section 338.055.2(5), (6), (13), and (15), as well as 4 CSR 220-2.010(1)(N).		
002851/Walgreen Drug Stores Inc Walgreen Drug Store	2010-007989	Probation	05/29/2013 05/28/2016
	Three (3) years probation. Theft of controlled substances by technician, failed to maintain security over inventory of controlled substances. Section 338.055.2(6), (13), and (15), RSMo.		
005564/Walgreen Co Walgreens #03017	2007-005071	Probation	12/16/2011 12/15/2014
	Probation for three (3) years. Theft of controlled substances by technicians, failed to timely report loss to BNDD, unable to maintain adequate security to deter theft of drugs and accurately monitor controlled substances in inventory, and recordkeeping. Section 338.055.2(5), (6), and (15), RSMo.		
002966/Walgreen Drug Stores Inc Walgreens #03686	2010-007947	Probation	03/29/2012 03/28/2015
	Probation for three (3) years. Loss of controlled substances, and failure to maintain adequate security to deter theft of controlled substances. Section 338.055.2(5), (6), and (15), RSMo.		
2000172880/Walgreen Co Walgreens Pharmacy #05552	2009-007365	Probation	12/16/2011 12/15/2014
	Probation for three (3) years. Technician theft of controlled substances, recordkeeping, and failed to timely notify BNDD of loss. Section 338.055.2(5), (6), and (15), RSMo.		

Licensees Presently Under Disciplinary Order

Drug Distributor

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2013019603/Animal Health International Inc Animal Health International Inc	2012-007179	Probation	06/18/2013 06/17/2015
	Restricted license issued on Probation for two (2) years. Shipped legend drugs without being licensed to do so. Section 338.055.2(6), RSMo.		
901534/Bio Med Plus, Inc Bio Med Plus, Inc	2006-006449	Revoked	08/30/2007 08/29/2014
	Drug Distributor license revoked, may not apply for reinstatement for seven (7) years. Found guilty in Federal court of multiple counts of racketeering, racketeering conspiracy and wire fraud, all felony offenses. 338.065 RSMo		
2010003575/BMS Logistics, Inc. BMS Logistics, Inc	2009-004618	Probation	05/27/2010 05/26/2014
	Restricted license issued on Probation for four (4) years. Operated as a drug distributor without a license. Section 338.055.2(6), RSMo.		
2012019126/Recovery Management Corporation Cargo Largo	2012-003683	Probation	01/24/2013 01/23/2015
	Restricted license issued on probation for two (2) years. Operated without a valid drug distributor license. Section 338.055.2(6), RSMo.		
2011010765/Laser Pharmaceuticals LLC Laser Pharmaceuticals LLC	2010-007982	Probation	10/26/2011 10/25/2015
	Restricted license issued on Probation for four (4) years. Operated with an expired license. Section 338.055.2(6), RSMo.		
2010005578/McCoy Surgical Instruments and College Supplies McCoy Health Science Supply	2010-001234	Probation	04/06/2012 04/05/2016
	Probation for four (4) years. Operated prior to obtaining a drug distributor license. Section 338.055.2(5), (6), (10), (12), and (13), RSMo.		
2003026499/MED-E-QUIP Locators, Inc MED-E-QUIP Locators, Inc	2008-002633	Probation	09/28/2009 09/27/2014
	Probation for five (5) years. Violation of previous discipline regarding conducted business at a new location prior to notifying the Board of its change of location, purchased products from unlicensed drug distributors, failure to maintain equipment to monitor temperature and humidity, failure to maintain an alarm system. Section 338.055.3, RSMo.		
2009033411/Interlock Pharmacy Systems, LLC Omnicare of St. Louis	2010-007146	Probation	03/20/2012 03/19/2015
	Probation for three (3) years. Violation of discipline involving transfilling medical liquid oxygen without a FDA registration. Section 338.055.2(5), (6), (13), and (15), RSMo.		
2012005231/Oz Arc Gas Equipment & Supply Inc Oz Arc Gas	2011-006489	Probation	08/15/2012 08/14/2016
	Restricted license issued on Probation for four (4) years. Operated with an expired license, and changed locations and shipped drugs from the new location without first notifying the Board. Section 338.055.2(6), RSMo.		
2012037544/T L Corporation Quick Care Oxygen System	2011-004178	Probation	01/24/2013 01/23/2017
	Restricted license issued on Probation for four (4) years. Operated as a drug distributor without a license. Section 338.055.2(6), RSMo.		
2010004477/Stericycle, Inc Stericycle, Inc	2009-003974	Probation	07/29/2010 07/28/2014
	Drug distributor license issued on Probation for four (4) years. Continued to operate as a drug distributor after license expired. Section 338.055.2(6), RSMo.		

Licensees Presently Under Disciplinary Order

Drug Distributor

Lic Num/Licensee DBA	Complaint	Action Taken	Action From/Through
2012003608/Surgical Direct Inc Surgical Direct Inc	2012-000592	Probation	05/16/2012 05/15/2014
	Drug distributor license issued on Probation for four (4) years. Operated with an expired license. Section 338.055.2(6), RSMo.		
2010028799/Teva Animal Health Inc Teva Animal Health Inc	2010-004513	Probation	12/07/2010 12/06/2014
	Drug distributor license issued on probation for four (4) years. Operated without a valid license. Section 338.055.2(6) and (8), RSMo.		

MISSOURI BOARD OF PHARMACY

Pharmacy Technician Conditional Registration List

These individuals are eligible for employment as pharmacy technicians under conditions printed on his/her registration

Effective 3/7/2014

*****Licensees should also check the Pharmacy Employment Disqualification List and the HB 600 (tax suspension) list to verify authorization to work.*****

LAST NAME	FIRST NAME	MIDDLE NAME	REG NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	END DATE
Bledsoe	Angela	M	2013014522	9353 Hathaway Dr	Saint Louis	MO	63136	Conditional Employment	5/15/2013	5/14/2016
Buckles	Karen	L	2011005089	424 Timberidge Dr	Saint Peters	MO	63376	Conditional Employment	5/15/2011	5/14/2014
Carmichael	Brian	L	2013027523	810 6th St Apt A	Boonville	MO	65233	Conditional Employment	11/1/2013	10/31/2015
Cole	Allison	Ann	2012034448	12409 Michigan	Kansas City	MO	64146	Conditional Employment	10/1/2012	9/30/2015
Davis	Adonna	L	2013040345	3430 Wyoming	Saint Louis	MO	63118	Conditional Employment	11/1/2013	10/31/2016
Fountain	Lisa	M	2013036694	5435 N Flint Ridge Rd	Kansas City	MO	64151	Conditional Employment	10/1/2013	9/30/2015
Gooden	Bruce	Eric	2009031022	2189 Renault Dr Apt C	St. Louis	MO	63137	Conditional Employment	6/1/2012	5/31/2014
Hawn	Heather	Leann	2011023857	606 Jessica	Carl Junction	MO	64834	Conditional Employment	5/15/2013	5/14/2015
Hoerrmann	Jeanette	E	2013036620	1800 N Don	Kirksville	MO	63501	Conditional Employment	10/1/2013	9/30/2016
Holder	Erica		2013006405	132 Glen Garry Rd	Saint Louis	MO	63137	Conditional Employment	3/1/2013	2/28/2015
Hunter	Yolanda	Renee	2004028420	3523 Medora Ave	Saint Louis	MO	63121	Conditional Employment	9/1/2013	8/31/2015
Johnston	Ronald	Lee	2013032971	1011 Miss Belle	Excelsior Springs	MO	64024	Conditional Employment	9/1/2013	8/31/2016
Kammer	Mindy	Lynn	2001002546	801 Renee Lane	Creve Coeur	MO	63141	Conditional Employment	12/15/2012	12/14/2017
Kitchen	Sharita	Kaye	2013014521	5405 Wayne Ave.	Kansas City	MO	64110	Conditional Employment	5/15/2013	5/14/2016
Kreutz	Chris	L	2013014523	1010 Marvilla Ln	Saint Louis	MO	63131	Conditional Employment	5/15/2013	5/14/2016
Lamb	Stephanie	Lynn	2012011915	1511 South Scott	Independence	MO	64052	Conditional Employment	3/1/2013	2/28/2015
Lamphiere	Renee	Paula	2007003729	720 South Oak	Union	MO	63084	Conditional Employment	5/15/2013	5/14/2015
Nicholas	Megan	Michelle	2012031315	616 W Pine St	Bolivar	MO	65613	Conditional Employment	12/15/2012	12/14/2014

LAST NAME	FIRST NAME	MIDDLE NAME	REG NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	END DATE
Patrick	Aaron	Kathleen	2012041551	3554 Grandview Ct	Saint Charles	MO	63301	Conditional Employment	12/15/2012	12/14/2015
Pease	Leslianne	Nicole	2012031627	1126 S Birum	Bolivar	MO	65613	Conditional Employment	12/15/2012	12/14/2014
Rieffer	Edmond	Max	2012034185	809 Shady Trail Court	Saint Peters	MO	63376	Conditional Employment	11/1/2013	10/31/2018
Rollins	Aaron	Thomas	2012022032	1625 S Marion Ave 201C	Springfield	MO	65807	Conditional Employment	11/1/2013	10/31/2015
Smith	Briana	L	2013032972	3910 Buttonwood Dr Apt 1207	Columbia	MO	65201	Conditional Employment	9/1/2013	8/31/2015
Soto	Carmen	E	2013040349	2122 W Northwood	Bolivar	MO	65613	Conditional Employment	11/1/2013	10/31/2016
Stanley	Amie	A	2013036585	PO Box 1012	Warrensburg	MO	64093	Conditional Employment	10/1/2013	9/30/2018
Strange	Lori	Lynn	2000147578	P O Box 41	Knox City	MO	63446	Conditional Employment	11/1/2013	10/31/2015
Sule	Richard	D	2013006403	3941 N Garfield Ave	Kansas City	MO	64116	Conditional Employment	3/1/2013	8/31/2014

MISSOURI BOARD OF PHARMACY

Pharmacy Technician Employment Disqualification List

These individuals are not eligible for employment as pharmacy technicians

Effective 3/7/2014

*****Licensees should also check the Pharmacy Conditional Registration List and the HB 600 (tax suspension) list to verify authorization to work.*****

LAST NAME	FIRST NAME	MIDDLE NAME	REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	DATE ELIGIBLE FOR REHIRE
Adair	Sheila	Marie	2006011725	671 Country Acres Lane	Leasburg	MO	65535	Disqualified	12/10/2010	12/9/2015
Adams	Alicia	Marie		4513 NW 57th St	Kansas City	MO	64151	Disqualified	12/1/2012	11/30/2017
Adams	Cherish	Amanda	2008030853	112 Maple Dr	Fenton	MO	63026	Disqualified	5/15/2013	5/14/2018
Aiello	Carl	John		203 Trotters Point Dr	Wright City	MO	63390	Disqualified	12/1/2012	11/30/2015
Allen	Robert	K		5402 NE 43rd Ter	Kansas City	MO	64117	Disqualified	6/1/2012	5/31/2017
Anderson	Kali	Dawn	2007008891	607 S Main	Willard	MO	65781	Disqualified	6/1/2010	5/31/2015
Anderson	Rodney	H	2006020290	2180 Willing Ave	Kansas City	MO	64127	Disqualified	5/15/2011	5/14/2016
Anzalone	Kathleen	Bridget	2008037367	2672 Babble Creek Lane	O'Fallon	MO	63368	Disqualified	12/15/2009	12/14/2014
Apela	Talimalo	Lenora	2011032278	4001 90th Ave	Florissant	MO	63034	Disqualified	12/1/2012	11/30/2017
Arthur	Lana	R	2006037143	6200 NE 68th Terrace	Kansas City	MO	64119	Disqualified	3/12/2009	3/13/2014
Arzola	Joseph	Michael	2006013789	5213 NE 59th Terr	Kansas City	MO	64119	Disqualified	10/15/2010	10/14/2015
Avery	Justin	W	2009036704	604 South Butler A	Harrisonville	MO	64701	Disqualified	6/1/2012	5/31/2017
Ballard	Alvin	Aaron	2001015471	P O Box 721	Senath	MO	63876	Disqualified	3/1/2013	2/28/2018
Barnhart	Katherine	L	2000149513	616 Big Horn Dr	O Fallon	MO	63368	Disqualified	12/1/2012	11/30/2017
Bean	Damian	D	2006011188	105 Rex-Aire Court	Arnold	MO	63010	Disqualified	10/1/2009	9/30/2014

LAST NAME	FIRST NAME	MIDDLE NAME	REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	DATE ELIGIBLE FOR REHIRE
Benjamin	James	Richard	2008028152	5824 Holmes St	Kansas City	MO	64110	Disqualified	2/15/2011	2/14/2016
Bernard	Jennifer	Ann	2008037373	527 Cedar Ln	Festus	MO	63028	Disqualified	5/15/2011	5/14/2016
Betsworth	Blake	William	2008021386	5430 NE Randolph Rd	Kansas City	MO	64119	Disqualified	3/1/2010	2/28/2015
Bilyeu	Vicky	Ann	2002004816	685 Good Night Hollow Road	Walnut Shade	MO	65771	Disqualified	12/1/2012	11/30/2017
Blankenship	Stephanie	Christine	1999141642	4146 Concordia Ave	Saint Louis	MO	63116	Disqualified	11/1/2011	10/31/2016
Boehle	Drew	R	2009027749	22503 Howard Branch Rd	Warrenton	MO	63383	Disqualified	2/15/2011	2/14/2016
Bohrer	Shannon	Michael	2005037729	4272 Massabielle	Saint Louis	MO	63129	Disqualified	12/1/2012	11/30/2017
Booth	Garlanda	M		5623 E 27ths St	Kansas City	MO	64127	Disqualified	12/15/2011	12/14/2014
Borgman	Kevin	R	2012019316	2146 S Fairway #204	Springfield	MO	65804	Disqualified	9/1/2013	8/31/2018
Bowman	James			412 Great Hill Dr	Ballwin	MO	63021	Disqualified	11/1/2011	10/31/2014
Boyd	Danielle	Denise	2008006132	26 Buckeye Drive	Ferguson	MO	63135	Disqualified	12/15/2009	12/14/2014
Bradley	De'Vion	O		3635 Bellerive Blvd	Saint Louis	MO	63116	Disqualified	12/1/2012	11/30/2017
Brooks	Sharon	Kay	2006002299	202 N Crest	Raymore	MO	64083	Disqualified	5/15/2011	5/14/2016
Brown	Dalton	R		1243 County Rd 3230	Salem	MO	65560	Disqualified	9/1/2013	8/31/2018
Brown	Patricia	Alice	2006009178	3306 Sherman Park Dr	Saint Charles	MO	63303	Disqualified	12/1/2012	11/30/2017
Brown	Shawn	Shaunice		825 Chestnut St Rm 107	Jefferson City	MO	65101	Disqualified	12/1/2012	11/30/2015
Buchner	Benjamin	L	2013009901	5458 S. Farm Road 43	Billings	MO	65610	Disqualified	2/15/2014	2/14/2019
Buckner	Jessica	Jean	2010004712	6917 NE 56th St	Kansas City	MO	64119	Disqualified	11/1/2011	10/31/2014
Buffkins	Courtney	M	2010000621	6755 Wyn Hill	Saint Louis	MO	63133	Disqualified	3/1/2013	2/28/2018

LAST NAME	FIRST NAME	MIDDLE NAME	REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	DATE ELIGIBLE FOR REHIRE
Bugh	Jared	W	2008037380	816 N Florence	Kirksville	MO	63501	Disqualified	6/1/2010	5/31/2015
Buntin	Katherine	Anne	500599	1522 Ridgeline Drive	Moberly	MO	65270	Disqualified	11/24/2009	11/23/2014
Burts	Kristina	Marie		317 Wabash Woods Way	O Fallon	MO	63366	Disqualified	3/1/2013	2/28/2018
Byers	Jared	O'Neil	2012011899	264 Hillside Dr	Buena Vista	VA	24416	Disqualified	9/1/2012	8/31/2017
Byers	Mary	Anne	2009023637	2 York Drive	Bella Vista	AR	72714	Disqualified	2/15/2011	2/14/2016
Cain	Kelly	D	2011011746	10345 Glendale Street	Potosi	MO	63664	Disqualified	3/1/2013	2/28/2018
Campbell	Candace	Marie		2285 N Farm Rd 105	Springfield	MO	65802	Disqualified	12/15/2011	12/14/2014
Cannon	Greg	Darnale	2006035049	1015 Raisher	Saint Louis	MO	63130	Disqualified	9/4/2009	9/3/2014
Cannon	Robert	Lamarr		313 Chicago St	Kirkwood	MO	63122	Disqualified	12/15/2011	12/14/2014
Carlson	Sylvia	D		12 Wisteria Pt	Four Seasons	MO	65049	Disqualified	2/15/2014	2/14/2018
Carranza	Melody			204 Webster	Chillicothe	MO	64601	Disqualified	11/1/2011	10/31/2014
Carroll	Amber	Nicole	2012039851	5929 Kenwood Ave	Kansas City	MO	64110	Disqualified	2/15/2014	2/14/2019
Champion	Hope		2011037525	1104 Falcon St Apt 22	Park Hills	MO	63601	Disqualified	3/1/2013	2/28/2018
Chisesi	Krista	Mary		1212 E Salisbury Rd	Independence	MO	64050	Disqualified	10/15/2010	10/14/2015
Choate	Lee	D		845 W 13th St	Trenton	MO	64683	Disqualified	3/15/2012	3/14/2017
Cipponeri	Nancy	M	2000147124	5221 Ville Maura Ct	Hazelwood	MO	63042	Disqualified	5/15/2013	5/14/2018
Clooney	Matthew	Richard	2007020875	6 Beaver Ridge Ct	Saint Peters	MO	63376	Disqualified	5/15/2011	5/14/2016
Coleman	Erica	Rochelle	2005039339	1109 S 13th Street	Saint Louis	MO	63104	Disqualified	10/1/2009	9/30/2014
Coleman	Marci	Janeath	2008024948	7360 Normandie Ct	Hazelwood	MO	63042	Disqualified	9/4/2009	9/3/2014

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Conn	Deziray	Adonnica		5905 NE Parvin Rd	Kansas City	MO	64117	Disqualified	10/1/2012	9/30/2017
Craven	Aralee	Jane	2009004177	1401 River Run Dr	Platte City	MO	64079	Disqualified	5/15/2011	5/14/2016
Culver	Cheri	Lynn	2008027733	700 Pennsylvania St Apt 37	Park Hills	MO	63601	Disqualified	6/13/2009	6/12/2014
Curry	Niccole	Brianna	2010037766	5812 E 15th Terr.	Kansas City	MO	64126	Disqualified	2/15/2014	2/14/2017
Dang	Kevin	Le	2012022774	4623 E 6th St	Kansas City	MO	64124	Disqualified	11/1/2013	10/31/2018
Davis	Andrea	Germaine	2007017581	6010 Grimshaw	Saint Louis	MO	63120	Disqualified	9/4/2009	9/3/2014
Davis	Lorenzo	Antonio	2010014498	14 Harneywold Dr	Saint Louis	MO	63136	Disqualified	11/1/2011	10/31/2016
Day	Amber	N	2007020894	HC6 Box 32B	Doniphan	MO	63935	Disqualified	3/1/2010	2/28/2015
De Souza	Koffi	Eric	2007013485	10105 Wernall Rd #104	Kansas City	MO	64114	Disqualified	10/15/2010	10/14/2015
Denning	Joshua	R		9 St Timothy Dr	Saint Peters	MO	63376	Disqualified	11/1/2013	10/31/2018
Dennis	Benjamin	Scott	2007008955	1804 Cole St	West Plains	MO	65775	Disqualified	2/15/2011	2/14/2016
Dino	Joseph	S		421 Arlington Terrace Dr	Grover	MO	63040	Disqualified	4/5/2010	4/4/2015
Dostal	Margaret	Ann	2000167845	2038 S Lexington Avenue	Springfield	MO	65807	Disqualified	12/15/2009	12/14/2014
Duben	Jessica	Jane	2002023904	1403 Baker Dr	Independence	MO	64050	Disqualified	6/13/2009	6/12/2014
Dugger	Donna	Marie	2010030608	9417 Talbot Dr	Saint Louis	MO	63123	Disqualified	12/15/2011	12/14/2016
Edwards	Peggy	Sue	2005029930	17303 Mill Street	Marthasville	MO	63357	Disqualified	5/15/2013	5/14/2016
Edwards	Rebekah	Kathryn	2007021018	1008 E Portau Prince Ln	Moscow Mills	MO	63362	Disqualified	5/15/2011	5/14/2016
English	Brandy	Lynn	2009004469	4499 St Rd JJ	Fulton	MO	65251	Disqualified	9/1/2013	8/31/2018
Fish	Crystal		2010042752	235 Glenwood Cir	Cassville	MO	65625	Disqualified	5/15/2011	5/14/2016

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Freeman	Ryan		2011009662	601 Brandywine Ct	Plattsburg	MO	64477	Disqualified	3/1/2013	2/28/2018
Fuller	Angela	E	2011010621	22718 W 49th W	Shawnee Mission	KS	66226	Disqualified	6/1/2012	5/31/2017
Gaines	Heather		2010029371	957 Westglen Dr	Saint Louis	MO	63126	Disqualified	2/15/2012	2/14/2017
Garcia	Angelica			205 NW 1st St Ct	Blue Springs	MO	64014	Disqualified	3/15/2011	3/14/2016
Garcia	David	Dennis	2009008465	446 Leslie	Wood River	IL	62095	Disqualified	12/15/2009	12/14/2014
Golden	Cristin	Evonne	2000155718	40311 E Doris Neer Rd	Oak Grove	MO	64075	Disqualified	11/1/2009	10/31/2014
Goldman	Erin	Elizabeth	2012042016	614 Mildred Ave	Wood River	IL	62095	Disqualified	2/15/2014	2/14/2019
Goure	Nathan	Gary	2007020929	1016 W Meadowmere St	Springfield	MO	65807	Disqualified	6/13/2009	6/12/2014
Hamilton	Kenneth		2010041611	1702 3rd St	Mounds	IL	62964	Disqualified	11/1/2011	10/31/2016
Hansen	Robert	L		3162 W Clay Apt 221	St. Charles	MO	63301	Disqualified	6/1/2012	5/31/2017
Harden	Juanita	Marie	2010037805	4226 Marlin Dr	Saint Louis	MO	63121	Disqualified	3/1/2013	2/28/2018
Hargrove	Taisa	Shanae		4277 Maffitt	Saint Louis	MO	63113	Disqualified	12/1/2012	11/30/2017
Harkness	Joseph	Blaine	2007009001	12903 E McCoy	Independence	MO	64055	Disqualified	6/13/2009	6/12/2014
Harrelson	Angela	R	2010021239	511 E Ohio St #E	Clinton	MO	64735	Disqualified	12/1/2012	11/30/2017
Haseker	Christopher	Lee	2011013573	9021 Torchllite Ln. Apt G	Saint Louis	MO	63121	Disqualified	2/15/2012	2/14/2017
Haynes	Jaime	Renay	2010033870	16284 Cty Rd 206	Campbell	MO	63933	Disqualified	9/1/2011	8/31/2016
Henderson	Courtney	D	2008034562	3978 E Panama, PO Box 63	Deerfield	MO	64741	Disqualified	7/16/2009	7/15/2014
Henderson	Robin	Marieta	2008024472	7900 Country Club Dr #3	Overland Park	KS	66212	Disqualified	6/13/2009	6/12/2014
Herbolsheimer	Christopher	Allen	2012009575	1205 Chateau Dr	West Plains	MO	65775	Disqualified	9/1/2013	8/31/2018

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Herron	Charles			9309 E 73rd St	Kansas City	MO	64131	Disqualified	11/1/2011	10/31/2016
Hicks	Jessica	Leigh	2006035113	104 S Scott	Belton	MO	64012	Disqualified	5/15/2011	5/14/2016
Hogue	Evonne	Reid		3242 Ohio Avenue	Saint Louis	MO	63118	Disqualified	2/1/2010	1/30/2015
Hostler	Kali	Joe Ann	2006010913	404 East 18th St	Caruthersville	MO	63830	Disqualified	12/15/2011	12/14/2016
Houston	Jamie	Lyn	2009016249	2665 McKelvey Rd	Maryland Height	MO	63043	Disqualified	12/15/2011	12/14/2016
Howell	Scott	A	2008007680	2980 Stargaze Dr	O Fallon	MO	63368	Disqualified	3/1/2010	2/28/2015
Huff	Michael	Chance	2000144912	127 West 10th Street Apt 1015	Kansas City	MO	64105	Disqualified	12/15/2009	12/14/2014
Hunt	David	A	2004032855	9702 Hwy PP	Poplar Blff	MO	63901	Disqualified	9/1/2011	8/31/2016
Hurd	Treena	S	2010018135	5227 Maffit Ave	Saint Louis	MO	63113	Disqualified	5/15/2011	5/14/2016
Ibarra	Areli	J	2008022680	2908 Hunter Ave	Kansas City	MO	64129	Disqualified	3/12/2009	3/11/2014
Israel	Sarah	Sue	2009018907	106 #7 Carnegie St	Belton	MO	64012	Disqualified	12/31/2010	12/30/2015
Jackson	Carla		2004036311	5438 Delmar Apt 208	Saint Louis	MO	63112	Disqualified	12/10/2009	12/9/2014
Jacobs	Meagen	E		330 W Cleveland Ave	Belleville	IL	62220	Disqualified	9/1/2013	8/31/2018
Jeffcott	Jaclyn	Marie	2008017651	3851 Eiler	Saint Louis	MO	63116	Disqualified	6/13/2009	6/12/2014
Jenkins	Tamika	Ryanette		11937 Sycamore Ave	Grandview	MO	64030	Disqualified	12/1/2012	11/30/2017
Johnson	Jeffrey	Charles	1999142470	3805 Koala Drive	Columbia	MO	65202	Disqualified	5/15/2013	5/14/2018
Johnson	Lora	Beth		446 Co Hwy 425	Oran	MO	63771	Disqualified	9/15/2013	9/14/2018
Johnson	Marcus	Lamont		9936 S Bunker Hill Dr	Saint Louis	MO	63123	Disqualified	10/1/2012	9/30/2017
Johnson	Ray		2006031140	12012 E 54th Terrace	Kansas City	MO	64133	Disqualified	4/1/2009	3/31/2014

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Jones	Amy	K		141 W. Sarah	Saint Louis	MO	63122	Disqualified	10/15/2010	10/14/2015
Jones	DeMarco			856 Cordova	Saint Louis	MO	63138	Disqualified	3/1/2013	2/28/2018
Kell	Casey	Joseph	2009027012	2840 Palmer Ave	Granite City	IL	62040	Disqualified	6/13/2009	6/12/2014
Kienzle	Jonathan	E	2013020482	2736 Bloomfield	Saint Louis	MO	63129	Disqualified	2/15/2014	2/14/2019
Killian	Christina	Hope		12477 Village Dr Lot 8	Sainte Genevieve	MO	63670	Disqualified	3/1/2013	2/28/2018
Kirkpatrick	Carol	Paige	2008001201	117 Missouri	Charleston	MO	63834	Disqualified	12/1/2012	11/30/2017
Kistner	Cory	James	2007002049	8 Manderly Place	O'Fallon	MO	63366	Disqualified	12/15/2009	12/14/2014
Kitchen	Krystal	Rena	2006020499	10568 Spring Garden Dr	Saint Louis	MO	63137	Disqualified	5/15/2011	5/14/2016
Kohl	Lindsey	Danielle	2007025869	103 Windwood	Lake Saint Louis	MO	63367	Disqualified	8/6/2009	8/5/2014
Kruse	Melvin	Terrill		2400 NW R D Mize Rd	Blue Springs	MO	64015	Disqualified	4/15/2012	4/14/2017
Kunderer	Amanda	Lou		4551 Cambrook Dr	Saint Charles	MO	63304	Disqualified	5/15/2013	5/14/2018
Lancaster	Heather	R	2007012699	11935 Katie Jo Ct	Maryland Height	MO	63043	Disqualified	12/25/2008	12/24/2013
Large	Nikki	R	2004009263	12199 Saverton Drive	Saverton	MO	63467	Disqualified	10/1/2009	9/30/2014
Lawler	Joseph	F	2004032278	214 S. White Oak Ave	Republic	MO	65738	Disqualified	8/15/2010	8/14/2015
Layman	Judith	N		10583 Emerald Ridge Ave #4	Saint Louis	MO	63114	Disqualified	5/15/2013	5/14/2018
Lewis	Darletha	Monic	2005035447	5463 Claxton Avenue	Saint Louis	MO	63120	Disqualified	2/15/2011	2/14/2016
Lewis	Yvonne	Lee		314 Midridge Dr	Saint Louis	MO	63137	Disqualified	10/15/2010	10/14/2015
Lindmeier	Mary	Patricia	2007017633	3628 Meadowglen Ct	Saint Charles	MO	63303	Disqualified	12/31/2010	12/30/2015
Lindsey	Devon	D		1695 Bay Meadows	Florissant	MO	63033	Disqualified	3/12/2009	3/11/2014

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Lormis	Bryant	Andrew	2009023245	7209 Linda Ln	Hillsboro	MO	63050	Disqualified	12/31/2010	12/30/2015
Lott	Denise	Marcia	1999142606	4475 Ellenwood Ave.	Saint Louis	MO	63116	Disqualified	3/1/2013	2/28/2018
Lugo	Melissa			2260 NE Parvin Rd	Kansas City	MO	64116	Disqualified	2/15/2012	2/14/2015
Manry	Tanya		2011011289	228 E Timothy Ridge Rd	Stafford	MO	65757	Disqualified	11/1/2011	10/31/2016
Massimiano	Deborah	R	2012006394	P O Box 635	Rockaway Beach	MO	65740	Disqualified	12/1/2012	11/30/2017
Matrak	Milan			5539 Southfield Dr Apt A	Saint Louis	MO	63129	Disqualified	3/12/2009	3/11/2014
Mattison	Holly	Ann	2009027045	2728 Holly Trail	Poplar Bluff	MO	63901	Disqualified	6/1/2010	5/31/2015
McCleary	Zachary	Levi	2008022725	76077 Hwy H	Neosho	MO	64850	Disqualified	6/13/2009	6/12/2014
McDonald, Jr.	Shannon	Herbert	2006020513	816 SE 13th	Lees Summit	MO	64081	Disqualified	4/1/2009	3/31/2014
McKinzie	Robert	D		3203 NE 66th Street	Gladstone	MO	64119	Disqualified	3/12/2009	3/11/2014
McManis	Hollie	Ruthanne	2010009333	372 Cheyenne Dr	Branson	MO	65656	Disqualified	12/15/2011	12/14/2016
Mekonnen	Mallori		2006037863	1425 Sheridan Dr	Saint Louis	MO	63132	Disqualified	5/15/2011	5/14/2016
Meyer	Emily	Caroline	2005036698	18275 Sheerin Road	Pacific	MO	63069	Disqualified	6/13/2009	6/12/2014
Middlebrooks	William	James		4804 Pineneedle Trail	St. Louis	MO	63033	Disqualified	10/1/2013	9/30/2018
Miksell (Berry)	Kay	Kimberly	2006033457	311 N. Joplin Ave. Apt 4	Joplin	MO	64801	Disqualified	3/1/2010	2/28/2014
Milliman	Kerie	S		PO Box 10744	Kansas City	MO	64188	Disqualified	10/1/2013	9/30/2018
Milota	Angela	Marie	2009014980	1220 Troy Rd	Edwardsville	IL	62025	Disqualified	3/1/2010	2/28/2015
Mitchell	Stacie	Erin	2008032609	126 San Lorenzo	Fenton	MO	63026	Disqualified	12/15/2009	12/14/2014
Mitchell	Yashita	Sharretha	2008006244	5635 Pamplin Place	Saint Louis	MO	63136	Disqualified	12/15/2009	12/14/2014

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Mittler	Stephani	A	2011013575	11230 Liana Lane	saint Ann	MO	63074	Disqualified	9/1/2011	8/31/2016
Moonshine	Brandon	David	2008032611	3112 St Nathan	Saint Ann	MO	63074	Disqualified	12/31/2010	12/30/2015
Morgan	Breiana	Denise	2006013967	9657 Halls Ferry Rd	Saint Louis	MO	63136	Disqualified	3/1/2010	2/28/2015
Morinelli	Heather	R	2007009074	104 C Diego Ct	Columbia	MO	65203	Disqualified	1/3/2009	1/2/2014
Mosby	Sophea		2005036301	687 Curtis Street	Nixa	MO	65714	Disqualified	3/12/2009	3/11/2014
Muhammad	Jerome	Deen		2661 California Ave #A	Saint Louis	MO	63118	Disqualified	4/13/2009	4/12/2014
Nall	Jeremy	Blanton	2008006562	88 Keith Road	Sikeston	MO	63801	Disqualified	3/12/2009	3/11/2014
Neal	Tashara	Miranda	2012010915	10740 Page Ave	Saint Louis	MO	63132	Disqualified	12/1/2012	11/30/2017
Neely	Yalonda	Louise	2008031010	1708 Windward Court	Saint Louis	MO	63136	Disqualified	3/12/2009	3/11/2014
Nelson	Laura	Michelle	2008032615	11506 Lexington	Independence	MO	64054	Disqualified	9/1/2013	8/31/2018
Nevels	Ashley	N		740 S Business Hwy 13 Apt 201C	Lexington	MO	64067	Disqualified	8/1/2012	7/31/2017
Nunley	Corbin	B		4241 Lafayette	Saint Louis	MO	63110	Disqualified	2/15/2012	2/14/2017
Ochoa	Deborah	M	2008034563	7150 N Highland Court	Kansas City	MO	64118	Disqualified	5/6/2009	5/5/2014
Orr	Paulette	D	2012002777	3205 Elm Grove Drive #B	Columbia	MO	65202	Disqualified	12/15/2012	12/14/2017
Ossenfort	Janice	Arlene	2000155257	505 Forest Run Dr	Eureka	MO	63025	Disqualified	12/31/2010	12/30/2015
Parker	Denise			5014 Newport	Saint Louis	MO	63116	Disqualified	12/15/2012	12/14/2017
Patel	Nimisha	M	2007037908	13042 Walnutway Manor	Saint Louis	MO	63146	Disqualified	1/3/2009	1/2/2014
Paulus	Alex	M		16 Alvistson Ct	O'Fallon	MO	63366	Disqualified	6/1/2012	5/31/2017
Pendleton	Mandy	Sue	2008036548	1113 Midyett Road	Saint Joseph	MO	64506	Disqualified	10/15/2010	10/14/2015

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Perry	Virginia	Nichole	2009023844	350 Read St	Lebanon	MO	65536	Disqualified	10/15/2010	10/14/2015
Pickard	Sarah	Louise	2008003932	1045 Stone Hill Hwy	Hermann	MO	65041	Disqualified	7/13/2009	7/12/2014
Powell	Alicia	Renee	2010015484	1010 N 11th St	Poplar Bluff	MO	63901	Disqualified	5/15/2011	5/14/2016
Powell	Brittnay	Necole	2008013631	515 Larkin Ave	Saint Louis	MO	63135	Disqualified	3/12/2009	3/11/2014
Ray	Andrew	Joseph	2012022635	712 E Sunshine Apt D-19	Springfield	MO	65807	Disqualified	3/1/2013	2/28/2018
Reiss	Jennifer	E	2011035822	1919 Mirtle Grove Ct	Columbia	MO	65201	Disqualified	8/15/2012	8/14/2015
Rhodes	Octavia	R	2011019702	115 Monteith Circle	Saint Louis	MO	63137	Disqualified	12/1/2012	11/30/2017
Riddle	Sarah	Ashley	2007002089	637 E 13th St	Baxter Springs	KS	66713	Disqualified	6/1/2012	5/31/2017
Ridgeway	Stacie	Nicole	1999139962	212 Sunset Rd	Dixon	MO	65459	Disqualified	2/15/2012	2/14/2017
Ries	Mota		2011035768	229 Viewpoint Ln	Lake Saint Louis	MO	63367	Disqualified	12/1/2012	11/30/2017
Riley	Patricia	Antionette	2007038441	4117 Labadie Apt A	Saint Louis	MO	63115	Disqualified	6/13/2009	6/12/2014
Roberts	Tiffany	Marie	2008005022	4335 N Oak Trfwy	Kansas City	MO	64116	Disqualified	9/1/2011	8/31/2016
Rogers	Zacquary	Chase	2006001708	223 N Matteson Ave	Republic	MO	65738	Disqualified	6/13/2009	6/12/2014
Rosson	Heather	Ann	2001032939	310 North Peck Drive	Independence	MO	64056	Disqualified	3/1/2013	2/28/2018
Rowland	Sandra	K	2003028581	16221 Cordell Rd.	Kearney	MO	64060	Disqualified	6/13/2009	6/12/2014
Sample	Kristen	L	2011030156	1116 West Norton #135	Springfield	MO	65803	Disqualified	2/15/2014	2/14/2019
Samuel	Rebecca			4401C NW Hon Dr	Riverside	MO	64150	Disqualified	12/15/2012	12/14/2017
Sanders	Kaesha	Ivante	2008034134	3263 Agnes	Kansas City	MO	64128	Disqualified	5/15/2011	5/14/2016
Schaefer	Matthew	Arnold	2012011259	6802 Arthur Ave	Saint Louis	MO	63139	Disqualified	5/15/2013	5/14/2018

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Schul	Alison	Gayle	2008025493	8834 Green Crest Lane	Crestwood	MO	63126	Disqualified	12/1/2012	11/30/2017
Scott	Brittany	Nicole	2007031642	211 E Mount Vernon St	Nixa	MO	65714	Disqualified	2/15/2011	2/14/2016
Scott	Felicia			503 Ames Pl	Saint Louis	MO	63135	Disqualified	11/1/2011	10/31/2014
Sharp	Cassi	Lea	2008002837	104 Kennedy	Union	MO	63084	Disqualified	9/4/2009	9/3/2014
Shaw	Daryl	Demetrius		170 Fee Fee Road	St. Louis	MO	63042	Disqualified	8/15/2010	8/14/2015
Sherman	Hayley	Marie		536 Driftwood Dr Apt D	Jefferson City	MO	65109	Disqualified	5/15/2013	5/14/2018
Shinn	Tracy	Amber	2006030778	4138 Shepherds Hill Circle	Saint Charles	MO	63304	Disqualified	5/15/2011	5/14/2016
Simmermon	Cynthia	Lee	1999140015	518 Willow Drive	Grain Valley	MO	64029	Disqualified	3/30/2009	3/29/2014
Skillington	Amber	Lynn	2006037699	5256 Woosencraft Drive	Wentzville	MO	63385	Disqualified	6/13/2009	6/12/2014
Slape	Tommy	Joe	2010028235	3423 Arlington	Independence	MO	64052	Disqualified	12/15/2011	12/14/2016
Smith	Alondre	Nichole	2009019198	1115 N 11th St	Saint Louis	MO	63101	Disqualified	2/15/2011	2/14/2016
Smith	Amber	Jenea	2007010104	19400 E 37th Terr Ct S Apt 904	Independence	MO	64057	Disqualified	3/1/2010	2/28/2015
Smith	Amber	Marie	2007031654	855 Rogers Ln	Florissant	MO	63033	Disqualified	4/1/2009	3/31/2014
Smith	Kendra	LaTrice	2003029949	4722 Sacramento	Saint Louis	MO	63115	Disqualified	3/1/2013	2/28/2018
Souder	Cara	Lynn	2010016493	3502 Bethel St	Columbia	MO	65203	Disqualified	12/31/2010	12/30/2015
Stinson	Sarah	A	2012004070	2972 Hwy K	Bonne Terre	MO	63628	Disqualified	10/1/2013	9/30/2018
Stone	Jeffrey	L	2013011341	5932 Waterman	Saint Louis	MO	63112	Disqualified	2/15/2014	2/14/2019
Sykes	Tonya	Yvette		2154 68th St	Saint Louis	MO	63121	Disqualified	3/15/2011	3/14/2014
Szajnfeld	Isaac			9232 Wyandott	Kansas City	MO	64114	Disqualified	12/31/2010	12/30/2015

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Tackitt	Billy	G		3660 South Cox Ave Apt 1210	Springfield	MO	65807	Disqualified	8/15/2012	8/14/2017
Tate	Djoni	Shaunnett	2006006855	1819 N Taylor Apt A	St. Louis	MO	63113	Disqualified	3/1/2010	2/28/2015
Thomas	Bonnie	Elizabeth	2007016756	1207 S 9th St	Ozark	MO	65721	Disqualified	12/1/2012	11/30/2017
Thomas	Jasmine		2011037538	924 Raford Ct	Saint Louis	MO	63137	Disqualified	12/1/2012	11/30/2017
Thomas	Katherine	Rebecca	2010004877	410 Wildwood	Excelsior Springs	MO	64024	Disqualified	12/1/2012	11/30/2017
Thompson	Janie	Lynne		525 Southernside Lane	O Fallon	MO	63368	Disqualified	8/6/2009	8/5/2014
Thornton	Brian		2010038400	2429 Hickory Manor Drive	Ballwin	MO	63011	Disqualified	11/1/2013	10/31/2018
Thornton-Starr	Ashley	L.		8308 W Trails West Dr	Columbia	MO	65202	Disqualified	2/15/2014	2/14/2019
Throckmorton	Matthew	Aaron		7420 Murkins Rd	Kansas City	MO	64133	Disqualified	6/13/2009	6/12/2014
Turner	Ashley	Michele	2011008652	513 Marshall St	Fredericktown	MO	63645	Disqualified	2/15/2014	2/14/2019
Turner	Mary	Alice		1107 Hwy WW	Sullivan	MO	63080	Disqualified	10/1/2013	9/30/2018
Tyler	Rebecca	Lynn	2006008339	4156 Hwy AA	Broseley	MO	63932	Disqualified	6/1/2010	5/31/2015
Van	Damon	Terrell		9200 Nemo Drive	Saint Louis	MO	63123	Disqualified	3/12/2009	3/11/2014
Van Buren	Derrick	James	2008025748	7006 Kenny Drive	Fulton	MO	65251	Disqualified	3/12/2009	3/11/2014
Vaughn	Caleb	Randell		6918 Candlewick Way	Florissant	MO	63033	Disqualified	8/15/2012	8/14/2017
Vines	Tiana	Nichelle		359 Chalmette Dr	Hazelwood	MO	63042	Disqualified	5/15/2011	5/14/2016
Walker	Mark	A		9339 Bales Dr	Kansas City	MO	64132	Disqualified	10/1/2013	9/30/2018
Walker	Michael			1344 S Belcrest Ave	Springfield	MO	65804	Disqualified	3/1/2013	2/28/2018
Walker	Parnell			5711 St Louis Ave 2nd Floor	Saint Louis	MO	63120	Disqualified	11/1/2011	10/31/2014

LAST NAME	FIRST NAME	MIDDLE NAME	REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	DATE ELIGIBLE FOR REHIRE
Walker	Stephanie	Renee	2006010278	612 N. Allen St.	Bernie	MO	63822	Disqualified	11/1/2011	10/31/2016
Warfel	Laura	E	2010009436	14 S Duchesne	Florissant	MO	63031	Disqualified	3/1/2013	2/28/2018
Waters	Aaron	Hyun		1200 SW Crossing Dr	Lees Summit	MO	64081	Disqualified	8/15/2012	8/14/2015
Welch	Brian	Allen		2400 S Baltimore St Apt 217	Kirksville	MO	63501	Disqualified	11/15/2011	11/14/2016
Welch	Randi	Nicole	2008028492	8007 Milan Ave	University City	MO	63130	Disqualified	3/1/2013	2/28/2018
Werner	Misty	Nicole	2009031253	25400 S. Stark Rd	Peculiar	MO	64078	Disqualified	6/1/2012	5/31/2017
White	Jarnice	Verchelle		5246 Mimika	Saint Louis	MO	63136	Disqualified	12/15/2011	12/14/2014
White	Pamela	R		1027 Woodland Ave	Kansas City	MO	64106	Disqualified	11/15/2011	11/14/2016
White	Shonnel	Romone	2008004162	1008 Johnston Dr	Raymore	MO	64083	Disqualified	11/1/2011	10/31/2016
Wideman	Brian			9746 Midland Street	Saint Louis	MO	63114	Disqualified	11/1/2011	10/31/2016
Williams	Dominic	C	2012006084	7050 Vernon	University City	MO	63130	Disqualified	12/1/2012	11/30/2017
Williams	Karen	Renee	2002031299	2833 Miami	Saint Louis	MO	63109	Disqualified	3/1/2010	2/28/2015
Williams	Sara	K	2011015135	307 N Raum	Lawson	MO	64062	Disqualified	11/1/2013	10/31/2018
Wilson	Kevin	Paul		1524 Santa Cruz	Saint Charles	MO	63303	Disqualified	12/31/2010	12/30/2013
Windham	J L			9804 Tullamoor Dr	Saint Louis	MO	63136	Disqualified	9/4/2009	9/3/2014
Winkler	Kayla	Dawn	2012022021	383 NW Northshore Dr	Kansas City	MO	64151	Disqualified	3/1/2013	2/28/2018
Winters	Gary	Lee	2006030208	585 Arblay Pl	Ballwin	MO	63011	Disqualified	12/1/2012	11/30/2017
Wood	Kimberly	Angela	1999140101	500 E Kansas Ave	Independence	MO	64050	Disqualified	6/13/2009	6/12/2014
Wright	Marissa	R		1568 Wellston Ave	Saint Louis	MO	63133	Disqualified	11/1/2013	10/31/2018

LAST NAME	FIRST NAME	MIDDLE NAME	REGISTRATION NUMBER	ADDRESS	CITY	STATE	ZIP CODE	ACTION TAKEN	EFFECTIVE DATE	DATE ELIGIBLE FOR REHIRE
Wright	Patricia	M		2823 Tracy Avenue	Kansas City	MO	64109	Disqualified	11/1/2011	10/31/2016
Wruk	Tonya	Lynne	2007023227	3033 North 89th Street	Kansas City	KS	66109	Disqualified	2/15/2011	2/14/2016
Yazdanizadeh	Farhang		2008012541	2346 NE Parvin Rd	Kansas City	MO	64116	Disqualified	3/1/2010	2/28/2015
Zulpo	Matt	J		726 Reavis Barracks	Saint Louis	MO	63125	Disqualified	5/15/2013	5/14/2018

#E2 Board Licensee Statistics

LICENSEE COUNTS

PROFESSION	AS OF 3/21/2014
Pharmacists (active)	9,608
Pharmacists with Medication Therapy Services Classification	1,659 (up from 1,511 on Jan report)
Pharmacists (inactive)	262
Temporary Pharmacists	7
Interns	1,819
Technicians	22,108
Pharmacies – Instate (includes temporary phys)	1,498 + 0 temporary pharmacies
Pharmacies – Out of State	867
Drug Distributors – Instate (includes temporary DDs)	317 + 0 temporary drug distributor
Drug Distributors – OOS (includes temporary DDS)	1,052 + 0 temporary drug distributors
Drug Distributor Registrants	115

INSPECTIONS

Inspections conducted FY09	1,247
Inspections conducted FY10	1,362
Inspections conducted FY11	1,471
Inspections conducted FY12	1,347
Inspections conducted FY13	1,273
Inspections conducted 7/1/13 to 3/21/14	755

INVESTIGATIONS

FY 09 Opened	350
FY 10 Opened	357
FY 11 Opened	312
FY 12 Opened	319
FY 13 Opened	313
FY 14 Opened	262
Pending as of 3/21/14	59

#E3 Pharmacist Provider Status Legislation

- California Pharmacists Association – SB 493 (Hernandez Summary)

Pharmacist Provider Status Legislation SB 493 (Hernandez) Summary

Now that the pharmacist provider status bill has been signed by the Governor, many pharmacists are asking: “*what does this bill do for me?*” SB 493 grants all pharmacists certain authorities in all practice settings that had previously been limited to inpatient settings or integrated systems. The bill also establishes a new “Advanced Practice Pharmacist” recognition. This recognition can be granted when specified experience and/or certification requirements are met. The Advanced Practice Pharmacist recognition is not mandatory, but it does allow pharmacists to provide additional services. Below is a summary of SB 493’s changes, which take effect January 1, 2014, though some provisions require regulations by the Board of Pharmacy and will not take effect until those regulations are approved.

- Declares pharmacists as healthcare providers who have the authority to provide health care services.
- Authorizes *all licensed pharmacists* to:
 - Administer drugs and biologics when ordered by a prescriber. Previously, this was limited to oral and topical administration. SB 493 allows pharmacists to administer drugs via other methods, including by injection.
 - Provide consultation, training, and education about drug therapy, disease management and disease prevention.
 - Participate in multidisciplinary review of patient progress, including appropriate access to medical records.
 - Furnish self-administered hormonal contraceptives (the pill, the patch, and the ring) pursuant to a statewide protocol. This authority is similar to the existing emergency contraception protocol. Once a statewide protocol is adopted by the Board of Pharmacy, it will automatically apply to all pharmacists.
 - Furnish travel medications recommended by the CDC not requiring a diagnosis.
 - Furnish prescription nicotine replacement products for smoking cessation pursuant to a statewide protocol if certain training, certification, recordkeeping, and notification requirements are met. Once a statewide protocol is adopted by the Board of Pharmacy, it will automatically apply to all pharmacists.
 - Independently initiate and administer immunizations to patients three years of age and older if certain training, certification, recordkeeping, and reporting requirements are met. A physician protocol is still required to administer immunizations on children younger than three years of age.
 - Order and interpret tests for the purpose of monitoring and managing the efficacy and toxicity of drug therapies, in coordination with the patient’s primary care provider or diagnosing prescriber.
- Establishes an Advanced Practice Pharmacist (APP) recognition, and authorizes APPs to:
 - Perform patient assessments.
 - Order and interpret drug therapy-related tests in coordination with the patient’s primary care provider or diagnosing prescriber.
 - Refer patients to other healthcare providers.
 - Initiate, adjust, and discontinue drug therapy pursuant to an order by a patient’s treating prescriber and in accordance with established protocols.
 - Participate in the evaluation and management of diseases and health conditions in collaboration with other healthcare providers.
- Requires pharmacists seeking recognition as APPs to complete any *two* of the following three criteria:
 - Earn certification in a relevant area of practice, such as ambulatory care, critical care, oncology pharmacy or pharmacotherapy.
 - Complete a postgraduate residency program.
 - Have provided clinical services to patients for one year under a collaborative practice agreement or protocol with a physician, APP pharmacist, CDTM pharmacist, or health system.

SECTION A – OPEN

#A3A General Administration Report

- FDA Meeting Update
 - Agenda
 - Pharmacy Compounding Legislation and Implementation
 - Memorandum of Understanding With the States Under Section 503A
- Webinar Updates
 - BNDD Regulatory Update (August 14th) [1.0 CE required]
 - Board Regulatory Update (Include in July “Lunch With The Chief”)
- August Missouri Regulator Patient Safety Meeting
- Sterile Compounding Training (N.C.)
- Status of Board Rules
- Joint Regulator Patient Safety Conference
- HCCA- Certificate in Healthcare Compliance
- FY13 Annual Report
- Drug Distributor Licensing: Will the Board like to issue a pharmacy (Drug) distributor license?
 - 338.330
 - 338.333
- ANNUAL RENEWALS: Would the Board be interested in an annual renewal or renewal based on birthdate for Missouri pharmacists/interns?
- DRUG QUALITY & SECURITY ACT:
 - Discussion regarding regulation of an “outsourcing facility”? Should these be licensed/regulated by the Board? If yes, how (i.e.- should we establish a different license/compliance standards)?
 - Should we require separation of pharmacy & outsourcing activities?
 - Update on MOU requirements
 - Does the Board want to modify drug distributor rules to accommodate facilities distributing sterile compounding preparations intrastate?
 - According to the FDA, the DQSA applies to human drugs only and does not apply to vet drugs. Does the Board want to modify Missouri law to address drug distributors compounding veterinary drugs?
 - Does the Board want to disclose administrative letters of warning? [See Sec. 105]
- STERILE COMPOUNDING:
 - Does the Board want to proceed with preliminary rule drafting?
- Staff Recognitions

Federal-State Meeting to Discuss Pharmacy Compounding

U.S. Food and Drug Administration
White Oak Campus, Great Room
10903 New Hampshire Avenue
Silver Spring, Maryland 20993

AGENDA

Thursday, March 20, 2014

8:00 AM – 4:30 PM

8:00 AM – 9:00 AM **Registration**

9:00 AM – 10:15 AM **Welcome and Introduction**

Sally Howard, Deputy Commissioner for Policy, Planning, and Legislation, FDA

Opening Remarks

Janet Woodcock, Director, Center for Drug Evaluation and Research, FDA

Overview of Compounding Quality Act and FDA's Plans for Implementation

Jane Axelrad, Associate Director for Policy, Center for Drug Evaluation and Research, FDA

10:15 AM – 12:15 PM **Federal/State Communications – Panel Discussion**

- Sarah Kotler, Deputy Director, Division of Freedom of Information, Office of the Commissioner, FDA
- Lauren DiPaola, Testimony Specialist, Office of Policy and Risk Management, Office of Regulatory Affairs, FDA

10:45 AM – 11:00 AM **Break**

Federal/State Communications – Panel Discussion (con't)

- Tista Ghosh, Deputy Chief Medical Officer, Colorado Department of Public Health and Environment
- Michele Weizer, Vice Chair, Florida Board of Pharmacy
- Jay Campbell, Executive Director, North Carolina Board of Pharmacy
- Q&A/Comments

12:15 PM – 1:30 PM **Lunch**

1:30 PM – 2:45 PM **Inspections of Sterile Compounding Facilities and Enforcement**

- Ellen Morrison, Assistant Commissioner for Operations, Office of Regulatory Affairs, FDA
- Mike Levy, Deputy Director for Policy and Analysis, Office of Compliance, Center for Drug Evaluation and Research, FDA
- John Clay Kirtley, Executive Director, Arkansas Board of Pharmacy
- Q&A/Comments

- 2:45 PM – 3:00 PM **Break**
- 3:00 PM – 4:15 PM **Regulating interstate distribution of compounded drugs pursuant to section 503A under a Memorandum of Understanding (MOU) with FDA**
- Jane Axelrad, Associate Director for Policy, Center for Drug Evaluation and Research, FDA
 - Carmen Catizone, Executive Director, National Association of Boards of Pharmacy
 - Mark Johnston, Executive Director, Idaho Board of Pharmacy
 - Q&A/Comments
- 4:15 PM – 4:30 PM **Closing Remarks**
Danielle Grote, Acting Director of Intergovernmental Affairs, FDA

Friday, March 21, 2014

9:00 AM – 4:00 PM

- 9:00 AM – 9:15 AM **Brief Welcome**
Danielle Grote, Acting Director of Intergovernmental Affairs, FDA
- 9:15 AM – 10:45 PM **State Adverse Event Reporting**
- Gerald Dal Pan, Director, Office of Surveillance and Epidemiology, Center for Drug Evaluation and Research, FDA
 - Joseph Perz, Team Leader, Prevention and Response Branch, Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention
 - Marion Kainer, Director, Healthcare Associated Infections and Antimicrobial Resistance Program, Tennessee Department of Health
 - Todd Inafuku, Chairman, Hawaii Board of Pharmacy
 - Q&A/Comments
- 10:45 AM – 11:00 AM **Break**
- 11:00 AM – 12:15 PM **State Enforcement Priorities**
- Gay Dodson, Executive Director, Texas State Board of Pharmacy
 - Virginia Herold, Executive Officer, California State Board of Pharmacy
 - Anthony Rubinaccio, Executive Director, New Jersey Board of Pharmacy
 - Q&A/Comments
- 12:15 PM – 1:30 PM **Lunch**
- 1:30 PM – 2:45 PM **State Legislation/Regulation**
- Joy Johnson Wilson, Director, Health and Human Services Policy, National Conference of State Legislatures
 - Cody Wiberg, Executive Director, Minnesota Board of Pharmacy
 - Margaret Clifford, Chief Compliance Officer, New Hampshire Board of Pharmacy

- Mitra Gavgani, Chair, Sterile Compounding Sub-Committee, Maryland Board of Pharmacy
- Q&A/Comments

2:45 PM – 3:00 PM

Break

3:00 PM – 3:45 PM

Listening Session

Opportunity for States to share their views on other issues with FDA

3:45 PM – 4:00 PM

Meeting Wrap Up

Margaret Hamburg, Commissioner of Food and Drugs, FDA



Pharmacy Compounding Legislation and Implementation

50 State Meeting

Jane A. Axelrad
Associate Director for Policy
Center for Drug Evaluation and Research

March 20, 2014

Summary of Presentation

- Historical context
- Overview of 503A and 503B
- Implementation Efforts

Compounding by Outsourcers Has Increased

- Hospitals and health care systems compounded drugs in house for own use
- Over the past 15-20 years, hospitals and health care systems have increasingly begun to purchase compounded drugs from outsourcers
- For sterile drugs, compounding batches for multiple facilities, with long BUDs and distributing over long distances increase risks

Section 503A

- 503A describes the conditions under which certain compounded human drug products are entitled to exemptions from three sections of the FDCA requiring:
 - FDA approval prior to marketing (section 505)
 - Compliance with current good manufacturing practice (CGMP) (section 501(a)(2)(B)); and
 - Labeling with adequate directions for use (section 502(f)(1))
- Pharmacies that qualify for the exemptions are primarily regulated by the states, although some Federal requirements still apply (e.g., no insanitary conditions)

Section 503A Requirements

- Compounding performed by licensed pharmacist in a licensed pharmacy or Federal facility, or by licensed physician
- Prescription for an identified individual patient; anticipatory compounding in limited quantities before receipt of prescription

Requirements for Bulk Drug Substances Used to Compound Under 503A

- Bulk drug substances (i.e., active ingredients) used to compound must be:
 - Components of FDA-approved drugs;
 - The subject of a USP monograph; or
 - Appear on a list of bulk drugs developed by FDA of bulk drug substances acceptable for compounding
- In addition:
 - Bulk must be made at an FDA-registered facility;
 - Be accompanied by a Certificate of Analysis (COA)

Other Section 503A Requirements

- Cannot compound drugs that are on an FDA list of drugs that have been withdrawn or removed from the market because they have been found to be unsafe or not effective
- Cannot compound drugs that are on an FDA list of drugs that present demonstrable difficulties for compounding

Other Section 503A Requirements

- Cannot compound regularly or in inordinate amounts what are essentially copies of commercially available products
- Compounder cannot distribute or cause to be distributed interstate more than 5% of the total prescription orders dispensed or distributed by that pharmacy or physician unless they are located in a state that has entered into a Memorandum of Understanding that provides for appropriate investigation of complaints related to drugs distributed outside the state and addresses the distribution of inordinate amounts of compounded drug products interstate

Compounding Quality Act

- Removes certain provisions from section 503A related to solicitation of prescriptions and advertising and promotion that were found to be unconstitutional by the U.S. Supreme Court in 2002.
- Clarifies that section 503A is applicable to compounders nationwide
- Adds new section 503B: “Outsourcing Facilities”

A Registered Outsourcing Facility

- Must comply with CGMP requirements;
- Will be inspected by FDA according to a risk-based schedule; and
- Must meet certain other conditions to be exempt from the new drug approval requirements and the requirements for adequate directions for use.

Outsourcing Facility Conditions

- Registered outsourcing facilities must:
 - Report to FDA twice a year information about the products they compounded during previous six months
 - Report adverse events
 - Label their products with certain information

Other Conditions Similar To Those In 503A

- Outsourcing facilities cannot compound drug products that appear on FDA lists
 - of drug products that have been withdrawn or removed from the market because the drug products or their components have been found to be unsafe or not effective,
 - of drug products that present demonstrable difficulties for compounding,

Other Conditions for Outsourcing Facilities

- The outsourcing facility cannot compound a drug that is essentially a copy of one or more FDA-approved drugs.
- The outsourcing facility cannot compound a drug that is subject to a REMS with elements to assure safe use or from a bulk drug substance that is a component of such drug unless the outsourcing facility demonstrates it will use controls comparable to the REMS

Outsourcing Facility Use of Bulk Drug Substances

- An outsourcing facility may not compound from bulk drug substances –
 - unless the drug it is compounding appears on the FDA drug shortage list, or
 - the bulk drug substance appears on an FDA list identifying the bulk drug substances for which there is a clinical need.

Bulk Drug Substances Used by Outsourcing Facilities

- Bulk drug substances and other ingredients used to compound must comply with USP monographs, if they exist, and bulk drug substances used by outsourcing facilities must come from facilities that have registered with FDA, and be accompanied by a certificate of analysis.

Outsourcing Facility Fees

- An outsourcing facility will not be considered registered until it has paid the applicable annual establishment fee.
- An outsourcing facility may register without paying a fee until September 30, 2014, however, because fees are not required until October 1, 2014.
- Establishment fee is \$15,000 adjusted for inflation and small business reductions
- Statute also authorized reinspection fees

By Definition A Registered Outsourcing Facility

- Is engaged in the compounding of STERILE drugs
- Has elected to register as an outsourcing facility
- Complies with all of the conditions in section 503B
- NOT required to be a licensed pharmacy, but compounding must be by or under the direct supervision of a licensed pharmacist
- May or may not obtain prescriptions for identified individual patients

Compounders That Do Not Register as Outsourcing Facilities

- A compounder that:
 - does not register as an outsourcing facility and comply with the conditions under section 503B, and
 - compounds drugs that do not qualify for the exemptions under section 503A
- Is subject to all of the requirements in the FDCA applicable to conventional manufacturers.

The New Law Leaves Some Issues Unresolved

- Compounders may seek to hide out in the traditional compounding category and escape detection
- The lack of clarity in section 503A over whether a state or FDA has primary responsibility over a particular pharmacy remains

FDA Moving Swiftly to Implement the New Law

- On Dec. 2, FDA issued three draft guidances:
 - Guidance for compounders on how to register under section 503B as an outsourcing facility
 - Guidance for outsourcing facilities on how to report to FDA required information about the products they make
 - Guidance on the sections of 503A that require rulemaking or other FDA action to implement (bulks list, difficult to compound list, MOU)

FDA Solicited Nominations for Lists

- FDA published 3 Federal Register Notices soliciting nominations for:
 - The list of drugs that cannot be compounded under sections 503A and 503B because they are difficult to compound
 - The list of bulk drug substances that may be used to compound under section 503A
 - The list of bulk drug substances that may be used to compound under section 503B (based on clinical need)

Many Issues Remain In 503A and 503B

- Many parts of section 503A require implementation through rulemaking and/or consultation with an Advisory Committee
- FDA working on additional implementing guidance and regulations

FDA Providing Information About Registered Outsourcing Facilities

- We published a list and information about the status of the facilities including: date of last inspection; 483, if any; other action, if any (such as a warning letter); and whether they compound sterile drugs from bulk drug substances
- We also posted Q and A about what it does and does not mean to register as an outsourcing facility
- See:

<http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/PharmacyCompounding/ucm378645.htm>

FDA Encouraging Registration

- FDA sent letters to 6,000+ hospitals and health systems encouraging them to purchase compounded drugs from registered outsourcing facilities, if they have a medical need for compounded drugs
 - Letters emphasized why compounded drugs, including those made by an outsourcing facility, should only be used if there is a medical need that can't be met by an FDA-approved drug
- FDA also sent letters to governors, Boards of Health and Boards of Pharmacy encouraging them to consider ways to encourage compounders to register as outsourcing facilities

FDA Working With You

- State partners participated in many recent inspections of compounders; some were initiated at a state's request
- December, 2012, FDA convened a 50 State meeting
- FDA holding this meeting to discuss plans for implementing the law and get input from you on how best to partner to improve oversight of the compounding industry

FDA Working With USP To Improve USP Chapter 797

- FDA participating in the USP Expert Working Group and Expert Panel on the revisions to USP Chapter 797 standards that apply to sterile compounding by compounders not registered as outsourcing facilities

Oversight of Outsourcing Facilities

- FDA has begun inspecting outsourcing facilities, focusing on those that have not been inspected by FDA before they registered
 - Looking at processes for producing sterile drugs, and
 - Compliance with certain other conditions under section 503B such as the specified labeling requirements

Establishing CGMPs for Outsourcing Facilities

- FDA intends to issue draft interim CGMP guidance for outsourcing facilities and ultimately, final requirements in regulations
- FDA intends to post any inspectional observations for outsourcing facilities

Compounders Not Registered as Outsourcing Facilities

- FDA has been conducting inspections of compounding pharmacies for cause (in response to serious adverse event reports, reports of quality problems, and state requests)
- FDA has also been conducting proactive inspections to identify pharmacies with deficient sterile practices
- FDA will continue these efforts as available resources permit



Memorandum of Understanding With the States Under Section 503A

Jane A. Axelrad
Associate Director for Policy
Center for Drug Evaluation and Research

March 20, 2014

Purpose of MOU Provision

- This is one of several provisions of section 503A designed to distinguish between traditional compounding and conventional manufacturing
- Derived from FDA's 1992 Compliance Policy Guide that listed 9 factors to be considered in deciding whether to take action against a pharmacy for activities normally associated with a manufacturer
- One factor was: "Distributing inordinate amounts of compounded products out of state."

Statutory Provision

- Unless the drug product is compounded in a state that has entered into an MOU, a compounder cannot
 - distribute or cause to be distributed compounded drug products outside of the state in which they are compounded in quantities that exceed 5% of the total prescription orders dispensed or distributed by that pharmacy or physician

MOU Requirements

- The MOU must:
 - address “the distribution of inordinate amounts of compounded drug products interstate”; and
 - provide “for appropriate investigation by a State agency of complaints relating to compounded drug products distributed outside such State”

Standard MOU

- The statute does not contemplate 50 individual MOUs
- FDA directed to develop a standard MOU in consultation with NABP

MOU History – 12/23/98 Draft

- In 1999, after consultation with NABP, FDA published a draft standard MOU for comment. Draft MOU provisions:
 - State agreed to investigate complaints of compounded drugs shipped interstate
 - Complaints included reports of serious AEs, alleged violations of the FDCA including compounding that does not qualify for the exemptions in section 503A and compounding of a drug product that is adulterated or misbranded

12/23/98 Draft, cont'd

- Encouraged cooperation with the state into which the drug was shipped and referrals between states, and specified actions to be taken based on findings from investigations
- Asked states to maintain records of complaints and investigations for 3 years
- Disputes between two states could be referred to FDA district offices

12/23/98 Draft - Inordinate Amounts

- Defined “inordinate” in terms of both total Rx and individual products:
 - Number of compounded prescriptions dispensed or distributed interstate annually by a pharmacy or physician is equal to or greater than 20% of the total number of prescriptions dispensed or distributed (including both intrastate and interstate) by such pharmacy or physician; OR
 - The total number of prescriptions so dispensed or distributed was less than 20% but the total amount for one or more individual compounded drug products constituted more than 5% of the total number of Rx’s dispensed or distributed

12/23/98 Draft - Inordinate Amounts

- Distribution to patients interstate but within 50 miles of the compounding pharmacy was excluded from the calculation
- Compounding in response to an emergency was also excluded

Issues for Discussion

- How should FDA define “inordinate amounts” in the MOU? Options include:
 - Percentage
 - Range
 - Absolute amount
 - No amount
 - Per product or total or both
- How can it be made implementable by states and FDA?
- Should it take into account contiguous states? If so, how?

Issues for Discussion, cont'd

- What should the MOU say about the handling of complaints?
 - What complaints should the MOU address?
- Options:
- Related to compounded products shipped interstate or all complaints?
 - Limit to complaints related to adverse events (AEs)? Or include quality problems (e.g, contamination, potency) that haven't yet led to AEs? Other types of complaints?

Issues for Discussion, cont'd

- What should the MOU say about what constitutes “appropriate investigation by a State agency of complaints”?
- Should the MOU require the state to notify FDA about complaints? If so, when?
- Should the MOU specify the type of coordination and communication between FDA and states to ensure investigations are appropriate?

Missouri Revised Statutes

Chapter 338 Pharmacists and Pharmacies Section 338.330

August 28, 2013

Definitions.

338.330. As used in sections 338.300 to 338.370, the following terms mean:

(1) "Legend drug":

(a) Any drug or biological product:

a. Subject to Section 503(b) of the Federal Food, Drug and Cosmetic Act, including finished dosage forms and active ingredients subject to such Section 503(b); or

b. Required under federal law to be labeled with one of the following statements prior to being dispensed or delivered:

(i) "Caution: Federal law prohibits dispensing without prescription";

(ii) "Caution: Federal law restricts this drug to use by or on the order of a licensed veterinarian"; or

(iii) "Rx Only"; or

c. Required by any* applicable federal or state law or regulation to be dispensed by prescription only or that is restricted to use or dispensed by practitioners only; and

(b) The term "drug", "prescription drug", or "legend drug" shall not include:

a. An investigational new drug, as defined by 21 CFR 312.3(b), that is being utilized for the purposes of conducting a clinical trial or investigation of such** drug or product that is governed by, and being conducted under and pursuant to, 21 CFR 312, et. seq.;

b. Any drug product being utilized for the purposes of conducting a clinical trial or investigation that is governed by, and being conducted under and pursuant to, 21 CFR 312, et. seq.; or

c. Any drug product being utilized for the purposes of conducting a clinical trial or investigation that is governed or approved by an institutional review board subject to 21 CFR Part 56 or 45 CFR Part 46;

(2) "Out-of-state wholesale drug distributor", a wholesale drug distributor with no physical facilities located in the state;

(3) "Pharmacy distributor", any licensed pharmacy, as defined in section 338.210, engaged in the delivery or distribution of legend drugs to any other licensed pharmacy where such delivery or distribution constitutes at least five percent of the total gross sales of such pharmacy;

(4) "Wholesale drug distributor", anyone engaged in the delivery or distribution of legend drugs from any location and who is involved in the actual, constructive or attempted transfer of a drug or drug-related device in this state, other than to the ultimate consumer. This shall include, but not be limited to, drug wholesalers, repackagers and manufacturers which are engaged in the delivery or distribution of drugs in this state, with facilities located in this state or in any other state or jurisdiction. A wholesale drug distributor shall not include any common carrier or individual hired solely to transport legend drugs. Any locations where drugs are delivered on a consignment basis, as defined by the board, shall be exempt from licensure as a drug distributor, and those standards of practice required of a drug distributor but shall be open for inspection by board of pharmacy representatives as provided for in section 338.360.

(L. 1989 S.B. 39, A.L. 1993 S.B. 27, A.L. 1998 S.B. 940, A.L. 2011 H.B. 412 merged with S.B. 284 merged with S.B. 325)

Effective 6-10-11(H.B. 412)

7-07-11 (S.B. 325)

7-11-11 (S.B. 284)

*Word "an" appears in original rolls of H.B. 412, 2011.

**Word "that" appears in original rolls of H.B. 412, 2011.

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[Missouri General Assembly](#)

Missouri Revised Statutes

Chapter 338 Pharmacists and Pharmacies Section 338.333

August 28, 2013

License required, temporary licenses may be granted--out-of-state distributors, reciprocity allowed, when.

338.333. 1. Except as otherwise provided by the board of pharmacy by rule in the event of an emergency or to alleviate a supply shortage, no person or distribution outlet shall act as a wholesale drug distributor or pharmacy distributor without first obtaining license to do so from the Missouri board of pharmacy and paying the required fee. The board may grant temporary licenses when the wholesale drug distributor or pharmacy distributor first applies for a license to operate within the state. Temporary licenses shall remain valid until such time as the board shall find that the applicant meets or fails to meet the requirements for regular licensure. No license shall be issued or renewed for a wholesale drug distributor or pharmacy distributor to operate unless the same shall be operated in a manner prescribed by law and according to the rules and regulations promulgated by the board of pharmacy with respect thereto. Separate licenses shall be required for each distribution site owned or operated by a wholesale drug distributor or pharmacy distributor, unless such drug distributor or pharmacy distributor meets the requirements of section 338.335.

2. An agent or employee of any licensed or registered wholesale drug distributor or pharmacy distributor need not seek licensure under this section and may lawfully possess pharmaceutical drugs, if he is acting in the usual course of his business or employment.

3. The board may permit out-of-state wholesale drug distributors or out-of-state pharmacy distributors to be licensed as required by sections 338.210 to 338.370 on the basis of reciprocity to the extent that an out-of-state wholesale drug distributor or out-of-state pharmacy distributor both:

(1) Possesses a valid license granted by another state pursuant to legal standards comparable to those which must be met by a wholesale drug distributor or pharmacy distributor of this state as prerequisites for obtaining a license under the laws of this state; and

(2) Distributes into Missouri from a state which would extend reciprocal treatment under its own laws to a wholesale drug distributor or pharmacy distributor of this state.

(L. 1989 S.B. 39 § 338.340, A.L. 2010 H.B. 2226, et al., A.L. 2012 H.B. 1563)

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[Missouri General Assembly](http://www.moga.mo.gov)

SECTION B – OPEN HEARINGS

THERE ARE NO ITEMS FOR THIS SECTION

SECTION C – OPEN

#C1A Applications for Intern Training Pharmacy Special Site

- Genelex Corporation
- Hope Family Care Center
- Lloyd's Pharmacy
- Walgreens Regional Office

International Special Site

- Memo from Ferguson
- Komfo Anokye Teaching Hospital
- St. Phillip's Mission

**SECTION D – OPEN
DISCUSSION AGENDA**

#D2 2014 Legislative Update

- Executive Director Summary
- HB 1683
 - <http://www.house.mo.gov/billtracking/bills141/billpdf/commit/HB1683C.PDF>

SECOND REGULAR SESSION
HOUSE COMMITTEE SUBSTITUTE FOR
HOUSE BILL NO. 1683
97TH GENERAL ASSEMBLY

5304H.03C

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To repeal sections 324.001 and 338.010, RSMo, and to enact in lieu thereof two new sections relating to the regulation of professional licenses.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Sections 324.001 and 338.010, RSMo, are repealed and two new sections
2 enacted in lieu thereof, to be known as sections 324.001 and 338.010, to read as follows:

324.001. 1. **(1) The purpose of sections 324.001 to 324.1109 is to promote the
2 general welfare by establishing guidelines for the regulation of occupations and professions
3 not regulated prior to January 1, 2015, and those regulated professions that seek to
4 substantially increase their scope of practice.**

5 **(2) All individuals may engage in the occupation of their choice, free from
6 unreasonable government regulation. The state may not impose a substantial burden on
7 an individual's pursuit of their occupation or profession unless there is a compelling
8 interest for the state to protect the general welfare. Where such an interest exists, the
9 regulation adopted by the state should be the least restrictive type of regulation consistent
10 with the public interest to be protected.**

11 **(3) It is the intent of this chapter that no regulation shall, after January 1, 2014, be
12 imposed upon any occupation or profession except for the exclusive purpose of protecting
13 the general welfare.**

14 **(4) All bills introduced in the legislature to regulate an occupation or profession for
15 the first time should be reviewed according to the following criteria. An occupation or
16 profession should be regulated by the state only when:**

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

17 **(a) Unregulated practice has caused significant harm and endangered the general**
18 **welfare, and the potential for further harm and endangerment is easily recognizable and**
19 **not remote or dependent upon tenuous argument;**

20 **(b) The public needs and can reasonably be expected to benefit from an assurance**
21 **of initial personal qualifications; and**

22 **(c) The general welfare cannot be effectively protected by other means.**

23 **(5) After evaluating the criteria in subdivision (4) of this subsection and considering**
24 **governmental, economic, and societal costs and benefits, if the legislature finds that the**
25 **state has a compelling interest in regulating an occupation or profession not previously**
26 **regulated by law, the least restrictive type of regulation should be implemented, consistent**
27 **with the need to protect the general welfare and this section where:**

28 **(a) Market competition, common law, statutory civil actions, and criminal**
29 **prohibitions are insufficient to eradicate actual harm, the regulation should provide for**
30 **stricter civil actions and criminal prosecutions;**

31 **(b) A service being performed for individuals involves a hazard to the general**
32 **welfare, the regulation should impose inspection requirements and enable an appropriate**
33 **state agency to enforce violations by injunctive relief in court, including, but not limited**
34 **to, regulation of the business activity providing the service rather than practitioners;**

35 **(c) The threat to the general welfare resulting from the practitioner's services is**
36 **relatively small, easily identifiable or predictable, the regulation should implement a**
37 **system of insurance, bonding, or registration;**

38 **(d) The consumer possesses significantly less information so that the practitioner**
39 **puts the consumer in a disadvantageous position relative to the practitioner to judge the**
40 **quality of the practitioner's services, the regulation should implement a voluntary system**
41 **of certification; or**

42 **(e) There is no other type of regulation that will protect the general welfare other**
43 **than licensing, the regulation should implement a system of licensing.**

44 **2. For the purposes of this section, the following terms mean:**

45 **(1) "Applicant group", any occupational or professional group or organization, any**
46 **individual, or any other interested party that proposes that any occupation or profession**
47 **not presently regulated be regulated or proposes to substantially increase the scope of**
48 **practice of the occupation or profession;**

49 **(2) "Certification", a voluntary program in which the government grants**
50 **nontransferable recognition to an individual who meets personal qualifications established**
51 **by a legislative body. Upon approval, the individual may use "certified" as a designated**
52 **title. Someone who has not been recognized as certified may perform the occupation for**

53 **compensation lawfully, but may not use the title certified. This term shall not be**
54 **synonymous with an occupational license or prohibit the use of private certification;**

55 **(3) "Department", the department of insurance, financial institutions and professional**
56 **registration;**

57 **[(2)] (4) "Director", the director of the division of professional registration; and**

58 **[(3)] (5) "Division", the division of professional registration;**

59 **(6) "General welfare", the concern of the government for the health, peace,**
60 **morality, and safety of its citizens;**

61 **(7) "Grandfather clause", a provision in a regulatory statute applicable to**
62 **practitioners actively engaged in the regulated occupation or profession prior to the**
63 **effective date of the regulatory statute that exempts the practitioners from meeting the**
64 **personal qualifications set forth in the regulatory statute to perform prescribed**
65 **occupational tasks;**

66 **(8) "Inspection", the periodic examination of practitioners by a state agency in**
67 **order to ascertain whether the practitioners' activities are being carried out in a fashion**
68 **consistent with the requisite level to protect the general welfare;**

69 **(9) "Lawful occupation", a course of conduct, pursuit, or profession that includes**
70 **the sale of goods or services that are not themselves illegal to sell irrespective of whether**
71 **the individual selling them is subject to an occupational regulation;**

72 **(10) "Least restrictive type of occupational regulations", in order from least to most**
73 **restrictive:**

74 **(a) Market competition;**

75 **(b) A provision for private civil action to remedy consumer harm;**

76 **(c) Criminal sanction;**

77 **(d) Regulation of the business activity providing the service rather than the**
78 **practitioner;**

79 **(e) Inspection;**

80 **(f) Bonding or insurance;**

81 **(g) Registration;**

82 **(h) Certification;**

83 **(i) Occupational license;**

84 **(11) "Legislative committees of reference", the standing legislative committees**
85 **designated by the respective rules committees of the senate and house of representatives**
86 **to consider proposed legislation to regulate occupations, or professions not previously**
87 **regulated;**

88 (12) "Occupational license", a nontransferable authorization in law for an
89 individual to perform a lawful occupation for compensation based on meeting personal
90 qualifications established by a legislative body. It shall be prohibited for an individual who
91 does not possess an occupational license to perform the occupation for compensation;

92 (13) "Occupational regulation", a statute, ordinance, rule, practice, policy, or other
93 law requiring an individual to possess certain personal qualifications to work in a lawful
94 occupation;

95 (14) "Personal qualifications", criteria related to an individual's personal
96 background, including completion of an approved educational program, satisfactory
97 performance on an examination, work experience, criminal history, moral standing, and
98 completion of continuing education;

99 (15) "Practitioner", an individual who has achieved knowledge and skill by
100 practice and is actively engaged in a specified occupation or profession;

101 (16) "Public member", an individual who is not currently, and has never been in
102 the past, a member or spouse of a member of the occupation or profession being regulated,
103 or an individual who does not currently have and has never in the past had a material
104 financial interest in either the rendering of the occupation or professional service being
105 regulated or an activity directly related to the occupation or profession being regulated;

106 (17) "Registration", a requirement established by the legislature in which a person:

107 (a) Submits notification to a state agency; and

108 (b) May use "registered" as a designated title.

109

110 Notification may include the person's name and address, the person's agent for service of
111 process, the location of the activity to be performed, and a description of the service the
112 person provides. Registration may include a requirement to post a bond but does not
113 include education or experience requirements. Nonregistered persons shall not perform
114 the occupation for compensation or use registered as a designated title. The term
115 registration shall not be synonymous with an occupational license and does not refer to or
116 prohibit the use of private registration;

117 (18) "Regulatory entity", any board, commission, agency, division, or other unit
118 or subunit of state government that regulates one or more professions, occupations,
119 industries, businesses, or other endeavors in this state;

120 (19) "State agency", every state office, department, board, commission, regulatory
121 entity, and agency of the state, and, where provided by law, programs and activities
122 involving less than the full responsibility of a state agency;

123 **(20) "Substantial burden", a requirement in an occupational regulation that**
124 **imposes significant difficulty or cost on an individual seeking to enter into or continue in**
125 **a lawful occupation and is more than an incidental burden.**

126 **[2.] 3. After January 1, 2014, applicant groups shall explain each of the following**
127 **factors to the extent requested by the legislative committees of reference:**

128 **(1) A definition of the problem and why regulation is necessary, including but not**
129 **limited to:**

130 **(a) The description and quantification of the actual harm to the general public due**
131 **to the fact the occupation or profession is not regulated;**

132 **(b) The extent to which the actual harm could be avoided;**

133 **(c) A description of how consumers will benefit in the future from the proposed**
134 **type of regulation; and**

135 **(d) The extent of autonomy a practitioner has, as indicated by:**

136 **a. The extent to which the occupation or profession calls for independent judgment,**
137 **and the extent of skill or experience required in making the independent judgment; and**

138 **b. The extent to which practitioners are supervised;**

139 **(2) The efforts made to address the actual harm caused:**

140 **(a) Voluntary efforts, if any, by members of the occupation or profession to:**

141 **a. Establish a code of ethics; or**

142 **b. Help resolve disputes between practitioners and consumers; and**

143 **(b) Recourse to and the extent of use of applicable law and whether it could be**
144 **strengthened to control the problem;**

145 **(3) The alternatives considered, including but not limited to:**

146 **(a) Increased civil or criminal sanctions;**

147 **(b) Regulation of businesses rather than practitioners;**

148 **(c) Regulation of the service or training program rather than the individual**
149 **practitioners;**

150 **(d) Inspections;**

151 **(e) Bonding or insurance;**

152 **(f) Registration of all practitioners;**

153 **(g) Certification of all practitioners;**

154 **(h) Other alternatives;**

155 **(i) Why the use of the alternatives specified in this subsection would not be**
156 **adequate to protect the general welfare; and**

157 **(j) Why licensing would serve to protect the general welfare;**

158 **(4) The benefit to the public if regulation is granted;**

159 **(5) The extent to which the incidences of specific problems present in the**
160 **unregulated occupation or profession can reasonably be expected to be reduced by**
161 **proposed regulation;**

162 **(6) Whether the public can identify qualified practitioners;**

163 **(7) The extent to which the public can be confident that qualified practitioners are**
164 **competent:**

165 **(a) Whether the proposed regulatory entity would be a board composed of**
166 **members of the profession and public members, or a state agency, or both, and, if**
167 **appropriate, their respective responsibilities in administering the system of inspections,**
168 **bonding, insurance, registration, certification, or licensure, including the composition of**
169 **the board and the number of public members, if any; the powers and duties of the board**
170 **or state agency regarding examinations and for cause revocation, suspension, and**
171 **nonrenewal of registrations, certificates, or licenses; the promulgation of rules and canons**
172 **of ethics; the conduct of inspections; the receipt of complaints and disciplinary action taken**
173 **against practitioners; and how fees would be levied and collected to cover the expenses of**
174 **administering and operating the regulatory system;**

175 **(b) If there is a grandfather clause, and, if so, how consumers will be protected**
176 **from the harm caused by current practitioners that is the basis for advocating for the**
177 **enactment of the proposed regulation;**

178 **(c) If there is a grandfather clause, if current practitioners will be required to meet**
179 **the prerequisite qualifications established by the regulatory entity at a later date, and, if**
180 **not, why not;**

181 **(d) Whether the regulatory entity would be authorized to enter into reciprocity**
182 **agreements with other jurisdictions;**

183 **(e) The nature and duration of any training including, but not limited to, whether**
184 **the training includes a substantial amount of supervised field experience; whether training**
185 **programs exist in this state; if there will be an experience requirement; whether the**
186 **experience must be acquired under a registered, certified, or licensed practitioner; whether**
187 **there are alternative routes of entry or methods of meeting the prerequisite qualifications;**
188 **whether all applicants will be required to pass an examination; and, if an examination is**
189 **required, by whom it will be developed and how the costs of development will be met; and**

190 **(f) What additional training programs are anticipated to be necessary to assure**
191 **training is accessible statewide; the anticipated time required to establish the additional**
192 **training programs; the types of institutions capable of providing the training; a description**
193 **of how training programs will meet the needs of the expected workforce, including reentry**
194 **workers, minorities, placebound students, and others;**

- 195 **(8) Assurance of the public that practitioners have maintained their competence:**
196 **(a) Whether the registration, certification, or licensure will carry an expiration**
197 **date; and**
198 **(b) Whether renewal will be based only upon payment of a fee, or whether renewal**
199 **will involve reexamination, peer review, or other enforcement;**
200 **(9) The extent to which regulation might harm the public;**
201 **(10) The extent to which regulation will restrict entry into the occupation or**
202 **profession:**
203 **(a) Whether the proposed personal qualifications are more restrictive than**
204 **necessary to insure safe and effective performance;**
205 **(b) How the proposed personal qualifications compare to other regulations in the**
206 **state which may involve greater risks to the general welfare; and**
207 **(c) The number of other states that regulate the same occupation or profession and**
208 **how the proposed personal qualifications compared to required personal qualifications in**
209 **other states that regulate the same occupation or profession;**
210 **(11) Whether there are similar professions to that of the applicant group which**
211 **should be included in, or portions of the applicant group which should be excluded from,**
212 **the proposed legislation;**
213 **(12) The maintenance of personal qualifications;**
214 **(13) Whether effective quality assurance standards exist in the occupation or**
215 **profession, such as legal requirements associated with specific programs that define or**
216 **enforce professional standards, or a code of ethics;**
217 **(14) How the proposed legislation will assure:**
218 **(a) The extent to which a code of ethics, if any, will be adopted; and**
219 **(b) Grounds for suspension or revocation of registration, certification, or licensure;**
220 **(15) A description of the group proposed for regulation, including a list of**
221 **associations, organizations, and other groups representing the practitioners in this state,**
222 **an estimate of the number of practitioners in each group, and whether the groups**
223 **represent different levels of practice; and**
224 **(16) The expected costs of regulation, including but not limited to:**
225 **(a) The impact registration, certification, or licensure will have on the costs of the**
226 **services to the public;**
227 **(b) The cost to the state and to the general public of implementing the proposed**
228 **legislation; and**

229 **(c) The cost to the state and the members of the group proposed for regulation for**
230 **the required education, including projected tuition and expenses and expected increases**
231 **in training programs, staffing, and enrollments at state training institutions.**

232 **4. Applicant groups shall submit a written report explaining the factors**
233 **enumerated in subsection 3 of this section to the legislative committees of reference.**

234 **5. Any legislative proposal which contains a continuing education requirement shall**
235 **be accompanied by evidence that such a requirement has been proven effective for the**
236 **profession addressed in the legislation.**

237 **6. Nothing in this section shall be construed to create a right of action against a**
238 **private party or to require a private party to do business with an individual who is not**
239 **licensed, certified, or registered with the government, or to create a right of action against**
240 **the state, county, municipal, or other level of government in the state.**

241 **7.** There is hereby established a "Division of Professional Registration" assigned to the
242 department of insurance, financial institutions and professional registration as a type III transfer,
243 headed by a director appointed by the governor with the advice and consent of the senate. All
244 of the general provisions, definitions and powers enumerated in section 1 of the Omnibus State
245 Reorganization Act of 1974 and Executive Order 06-04 shall apply to this department and its
246 divisions, agencies, and personnel.

247 **[3.] 8.** The director of the division of professional registration shall promulgate rules and
248 regulations which designate for each board or commission assigned to the division the renewal
249 date for licenses or certificates. After the initial establishment of renewal dates, no director of
250 the division shall promulgate a rule or regulation which would change the renewal date for
251 licenses or certificates if such change in renewal date would occur prior to the date on which the
252 renewal date in effect at the time such new renewal date is specified next occurs. Each board or
253 commission shall by rule or regulation establish licensing periods of one, two, or three years.
254 Registration fees set by a board or commission shall be effective for the entire licensing period
255 involved, and shall not be increased during any current licensing period. Persons who are
256 required to pay their first registration fees shall be allowed to pay the pro rata share of such fees
257 for the remainder of the period remaining at the time the fees are paid. Each board or
258 commission shall provide the necessary forms for initial registration, and thereafter the director
259 may prescribe standard forms for renewal of licenses and certificates. Each board or commission
260 shall by rule and regulation require each applicant to provide the information which is required
261 to keep the board's records current. Each board or commission shall have the authority to collect
262 and analyze information required to support workforce planning and policy development. Such
263 information shall not be publicly disclosed so as to identify a specific health care provider, as

264 defined in section 376.1350. Each board or commission shall issue the original license or
265 certificate.

266 [4.] 9. The division shall provide clerical and other staff services relating to the issuance
267 and renewal of licenses for all the professional licensing and regulating boards and commissions
268 assigned to the division. The division shall perform the financial management and clerical
269 functions as they each relate to issuance and renewal of licenses and certificates. "Issuance and
270 renewal of licenses and certificates" means the ministerial function of preparing and delivering
271 licenses or certificates, and obtaining material and information for the board or commission in
272 connection with the renewal thereof. It does not include any discretionary authority with regard
273 to the original review of an applicant's qualifications for licensure or certification, or the
274 subsequent review of licensee's or certificate holder's qualifications, or any disciplinary action
275 contemplated against the licensee or certificate holder. The division may develop and implement
276 microfilming systems and automated or manual management information systems.

277 [5.] 10. The director of the division shall maintain a system of accounting and budgeting,
278 in cooperation with the director of the department, the office of administration, and the state
279 auditor's office, to ensure proper charges are made to the various boards for services rendered
280 to them. The general assembly shall appropriate to the division and other state agencies from
281 each board's funds moneys sufficient to reimburse the division and other state agencies for all
282 services rendered and all facilities and supplies furnished to that board.

283 [6.] 11. For accounting purposes, the appropriation to the division and to the office of
284 administration for the payment of rent for quarters provided for the division shall be made from
285 the "Professional Registration Fees Fund", which is hereby created, and is to be used solely for
286 the purpose defined in subsection [5] 10 of this section. The fund shall consist of moneys
287 deposited into it from each board's fund. Each board shall contribute a prorated amount
288 necessary to fund the division for services rendered and rent based upon the system of accounting
289 and budgeting established by the director of the division as provided in subsection [5] 10 of this
290 section. Transfers of funds to the professional registration fees fund shall be made by each board
291 on July first of each year; provided, however, that the director of the division may establish an
292 alternative date or dates of transfers at the request of any board. Such transfers shall be made
293 until they equal the prorated amount for services rendered and rent by the division. The
294 provisions of section 33.080 to the contrary notwithstanding, money in this fund shall not be
295 transferred and placed to the credit of general revenue.

296 [7.] 12. The director of the division shall be responsible for collecting and accounting
297 for all moneys received by the division or its component agencies. Any money received by a
298 board or commission shall be promptly given, identified by type and source, to the director. The
299 director shall keep a record by board and state accounting system classification of the amount

300 of revenue the director receives. The director shall promptly transmit all receipts to the
301 department of revenue for deposit in the state treasury to the credit of the appropriate fund. The
302 director shall provide each board with all relevant financial information in a timely fashion.
303 Each board shall cooperate with the director by providing necessary information.

304 [8.] 13. All educational transcripts, test scores, complaints, investigatory reports, and
305 information pertaining to any person who is an applicant or licensee of any agency assigned to
306 the division of professional registration by statute or by the department are confidential and may
307 not be disclosed to the public or any member of the public, except with the written consent of
308 the person whose records are involved. The agency which possesses the records or information
309 shall disclose the records or information if the person whose records or information is involved
310 has consented to the disclosure. Each agency is entitled to the attorney-client privilege and work-
311 product privilege to the same extent as any other person. Provided, however, that any board may
312 disclose confidential information without the consent of the person involved in the course of
313 voluntary interstate exchange of information, or in the course of any litigation concerning that
314 person, or pursuant to a lawful request, or to other administrative or law enforcement agencies
315 acting within the scope of their statutory authority. Information regarding identity, including
316 names and addresses, registration, and currency of the license of the persons possessing licenses
317 to engage in a professional occupation and the names and addresses of applicants for such
318 licenses is not confidential information.

319 [9.] 14. Any deliberations conducted and votes taken in rendering a final decision after
320 a hearing before an agency assigned to the division shall be closed to the parties and the public.
321 Once a final decision is rendered, that decision shall be made available to the parties and the
322 public.

323 [10.] 15. A compelling governmental interest shall be deemed to exist for the purposes
324 of section 536.025 for licensure fees to be reduced by emergency rule, if the projected fund
325 balance of any agency assigned to the division of professional registration is reasonably expected
326 to exceed an amount that would require transfer from that fund to general revenue.

327 [11.] 16. (1) The following boards and commissions are assigned by specific type
328 transfers to the division of professional registration: Missouri state board of accountancy,
329 chapter 326; board of cosmetology and barber examiners, chapters 328 and 329; Missouri board
330 for architects, professional engineers, professional land surveyors and landscape architects,
331 chapter 327; Missouri state board of chiropractic examiners, chapter 331; state board of
332 registration for the healing arts, chapter 334; Missouri dental board, chapter 332; state board of
333 embalmers and funeral directors, chapter 333; state board of optometry, chapter 336; Missouri
334 state board of nursing, chapter 335; board of pharmacy, chapter 338; state board of podiatric
335 medicine, chapter 330; Missouri real estate appraisers commission, chapter 339; and Missouri

336 veterinary medical board, chapter 340. The governor shall appoint members of these boards by
337 and with the advice and consent of the senate.

338 (2) The boards and commissions assigned to the division shall exercise all their
339 respective statutory duties and powers, except those clerical and other staff services involving
340 collecting and accounting for moneys and financial management relating to the issuance and
341 renewal of licenses, which services shall be provided by the division, within the appropriation
342 therefor. Nothing herein shall prohibit employment of professional examining or testing services
343 from professional associations or others as required by the boards or commissions on contract.
344 Nothing herein shall be construed to affect the power of a board or commission to expend its
345 funds as appropriated. However, the division shall review the expense vouchers of each board.
346 The results of such review shall be submitted to the board reviewed and to the house and senate
347 appropriations committees annually.

348 (3) Notwithstanding any other provisions of law, the director of the division shall
349 exercise only those management functions of the boards and commissions specifically provided
350 in the Reorganization Act of 1974, and those relating to the allocation and assignment of space,
351 personnel other than board personnel, and equipment.

352 (4) "Board personnel", as used in this section or chapters 317, 326, 327, 328, 329, 330,
353 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, and 345, shall mean personnel whose functions
354 and responsibilities are in areas not related to the clerical duties involving the issuance and
355 renewal of licenses, to the collecting and accounting for moneys, or to financial management
356 relating to issuance and renewal of licenses; specifically included are executive secretaries (or
357 comparable positions), consultants, inspectors, investigators, counsel, and secretarial support
358 staff for these positions; and such other positions as are established and authorized by statute for
359 a particular board or commission. Boards and commissions may employ legal counsel, if
360 authorized by law, and temporary personnel if the board is unable to meet its responsibilities with
361 the employees authorized above. Any board or commission which hires temporary employees
362 shall annually provide the division director and the appropriation committees of the general
363 assembly with a complete list of all persons employed in the previous year, the length of their
364 employment, the amount of their remuneration, and a description of their responsibilities.

365 (5) Board personnel for each board or commission shall be employed by and serve at the
366 pleasure of the board or commission, shall be supervised as the board or commission designates,
367 and shall have their duties and compensation prescribed by the board or commission, within
368 appropriations for that purpose, except that compensation for board personnel shall not exceed
369 that established for comparable positions as determined by the board or commission pursuant
370 to the job and pay plan of the department of insurance, financial institutions and professional

371 registration. Nothing herein shall be construed to permit salaries for any board personnel to be
372 lowered except by board action.

373 [12.] 17. All the powers, duties, and functions of the division of athletics, chapter 317,
374 and others, are assigned by type I transfer to the division of professional registration.

375 [13.] 18. Wherever the laws, rules, or regulations of this state make reference to the
376 "division of professional registration of the department of economic development", such
377 references shall be deemed to refer to the division of professional registration.

338.010. 1. The "practice of pharmacy" means the interpretation, implementation, and
2 evaluation of medical prescription orders, including any legend drugs under 21 U.S.C. Section
3 353; receipt, transmission, or handling of such orders or facilitating the dispensing of such
4 orders; the designing, initiating, implementing, and monitoring of a medication therapeutic plan
5 as defined by the prescription order so long as the prescription order is specific to each patient
6 for care by a pharmacist; the compounding, dispensing, labeling, and administration of drugs and
7 devices pursuant to medical prescription orders and administration of [viral influenza,
8 pneumonia, shingles and meningitis vaccines] **any vaccine on the Centers for Disease Control
9 and Prevention's adolescent or adult immunization schedule** by written protocol authorized
10 by a physician for persons [twelve] **seven** years of age or older [as authorized by rule or the
11 administration of pneumonia, shingles, and meningitis vaccines by written protocol authorized
12 by a physician for a specific patient] as authorized by rule; the participation in drug selection
13 according to state law and participation in drug utilization reviews; the proper and safe storage
14 of drugs and devices and the maintenance of proper records thereof; consultation with patients
15 and other health care practitioners, and veterinarians and their clients about legend drugs, about
16 the safe and effective use of drugs and devices; and the offering or performing of those acts,
17 services, operations, or transactions necessary in the conduct, operation, management and control
18 of a pharmacy. No person shall engage in the practice of pharmacy unless he is licensed under
19 the provisions of this chapter. This chapter shall not be construed to prohibit the use of auxiliary
20 personnel under the direct supervision of a pharmacist from assisting the pharmacist in any of
21 his or her duties. This assistance in no way is intended to relieve the pharmacist from his or her
22 responsibilities for compliance with this chapter and he or she will be responsible for the actions
23 of the auxiliary personnel acting in his or her assistance. This chapter shall also not be construed
24 to prohibit or interfere with any legally registered practitioner of medicine, dentistry, or podiatry,
25 or veterinary medicine only for use in animals, or the practice of optometry in accordance with
26 and as provided in sections 195.070 and 336.220 in the compounding, administering,
27 prescribing, or dispensing of his or her own prescriptions.

28 2. Any pharmacist who accepts a prescription order for a medication therapeutic plan
29 shall have a written protocol from the physician who refers the patient for medication therapy

30 services. The written protocol and the prescription order for a medication therapeutic plan shall
31 come from the physician only, and shall not come from a nurse engaged in a collaborative
32 practice arrangement under section 334.104, or from a physician assistant engaged in a
33 supervision agreement under section 334.735.

34 3. Nothing in this section shall be construed as to prevent any person, firm or corporation
35 from owning a pharmacy regulated by sections 338.210 to 338.315, provided that a licensed
36 pharmacist is in charge of such pharmacy.

37 4. Nothing in this section shall be construed to apply to or interfere with the sale of
38 nonprescription drugs and the ordinary household remedies and such drugs or medicines as are
39 normally sold by those engaged in the sale of general merchandise.

40 5. No health carrier as defined in chapter 376 shall require any physician with which they
41 contract to enter into a written protocol with a pharmacist for medication therapeutic services.

42 6. This section shall not be construed to allow a pharmacist to diagnose or independently
43 prescribe pharmaceuticals.

44 7. The state board of registration for the healing arts, under section 334.125, and the state
45 board of pharmacy, under section 338.140, shall jointly promulgate rules regulating the use of
46 protocols for prescription orders for medication therapy services and administration of viral
47 influenza vaccines. Such rules shall require protocols to include provisions allowing for timely
48 communication between the pharmacist and the referring physician, and any other patient
49 protection provisions deemed appropriate by both boards. In order to take effect, such rules shall
50 be approved by a majority vote of a quorum of each board. Neither board shall separately
51 promulgate rules regulating the use of protocols for prescription orders for medication therapy
52 services and administration of viral influenza vaccines. Any rule or portion of a rule, as that term
53 is defined in section 536.010, that is created under the authority delegated in this section shall
54 become effective only if it complies with and is subject to all of the provisions of chapter 536
55 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of
56 the powers vested with the general assembly pursuant to chapter 536 to review, to delay the
57 effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the
58 grant of rulemaking authority and any rule proposed or adopted after August 28, 2007, shall be
59 invalid and void.

60 8. The state board of pharmacy may grant a certificate of medication therapeutic plan
61 authority to a licensed pharmacist who submits proof of successful completion of a
62 board-approved course of academic clinical study beyond a bachelor of science in pharmacy,
63 including but not limited to clinical assessment skills, from a nationally accredited college or
64 university, or a certification of equivalence issued by a nationally recognized professional
65 organization and approved by the board of pharmacy.

66 9. Any pharmacist who has received a certificate of medication therapeutic plan authority
67 may engage in the designing, initiating, implementing, and monitoring of a medication
68 therapeutic plan as defined by a prescription order from a physician that is specific to each
69 patient for care by a pharmacist.

70 10. Nothing in this section shall be construed to allow a pharmacist to make a therapeutic
71 substitution of a pharmaceutical prescribed by a physician unless authorized by the written
72 protocol or the physician's prescription order.

73 11. "Veterinarian", "doctor of veterinary medicine", "practitioner of veterinary
74 medicine", "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)", "VMB", "MRCVS", or
75 an equivalent title means a person who has received a doctor's degree in veterinary medicine
76 from an accredited school of veterinary medicine or holds an Educational Commission for
77 Foreign Veterinary Graduates (EDFVG) certificate issued by the American Veterinary Medical
78 Association (AVMA).

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#D3A Patient Safety Working Group Report

D4A Mandatory Report of Pharmacist Discipline

In 2013, the Board voted to amend 20 CSR 2220-2.150 to incorporate the revised revisions of 383.133 that require mandatory pharmacist reporting. Rule draft is attached.

Would the Board like to begin enforcement prior to the rule revision?

- Draft 20 CSR 2220-2.150
- 383.133

**Title 20—DEPARTMENT OF
INSURANCE, FINANCIAL
INSTITUTIONS AND
PROFESSIONAL REGISTRATION
Division 2220—State Board of Pharmacy
Chapter 2—General Rules**

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20 CSR 2220-2.150 Mandatory Reporting Rule

PURPOSE: This rule defines the responsibilities of ~~a director of pharmacy or the pharmacist in charge, or both, in a hospital or ambulatory surgical center in reporting entities required to report~~ disciplinary actions against pharmacist employees ~~[to the chief executive officer of the employing institution]~~ or contractors under section 383.133, RSMo.

(1) The board of pharmacy shall receive and process any report from ~~[a hospital or ambulatory surgical center]~~ any hospital, ambulatory surgical center, as such terms are defined in chapter 197, temporary nursing staffing agency, nursing home, any nursing facility as such term is defined in chapter 198, or any pharmacy, drug distributor, temporary pharmacist staffing agency, or other entity that employs or contracts with a pharmacist to provide health care services to individuals concerning any ~~disciplining~~ disciplinary action against a licensed pharmacist or the voluntary resignation of any licensed pharmacist against whom any complaints or reports have been made which might have led to final disciplinary action.

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(2) A pharmacist permit holder or drug distributor shall file any report required by section 338.013, RSMo, and this rule within fifteen (15) days of the final disciplinary action. Reports from a hospital, ambulatory surgical center, nursing staffing agency, nursing home or nursing facility or other entity that is not a Missouri licensed pharmacy or drug distributor shall be filed by the director of pharmacy or other designee of the reporting entity. Reports to the board shall comply with the minimum requirements as set forth in section 383.133, RSMo and this rule. ~~This information, Reports~~ shall include, but not be limited to:

- (A) The name, address and telephone number of the person making the report;
- (B) The name, address ~~and~~ telephone number and license number of the person who is the subject of the report;
- (C) A brief description of the facts which gave rise to the issuance of the report, including the dates of occurrence deemed to necessitate the filing of the report;
- (D) If court action is involved and known to the reporting agent, the identity of the court, including the date of filing and the docket number of the action;
- (E) A statement as to what final action was taken ~~by the institution~~; and

1 (F) That the report is being submitted in order to comply with the reporting provisions of
2 Chapter 383, RSMo.

3 (3) ~~The director of pharmacy or pharmacist in charge shall report any actions as described~~
4 ~~in section (1) to the chief executive officer (CEO) or his/her designee.~~ Any activity that is
5 construed to be a cause for disciplinary action according to section 338.055, RSMo or
6 results in potential or actual harm to the public shall be deemed reportable to- the board.
7 Nothing in this rule shall be construed as limiting or prohibiting any pharmacist from
8 reporting a violation of the Pharmacy Practice Act directly to the Missouri Board of
9 Pharmacy.

10 (4) ~~Upon request, the Board may furnish a report of any disciplinary action received by it~~
11 ~~under the provisions of 383.133, RSMo, to the reporting entity. In response to an inquiry~~
12 ~~from a hospital or ambulatory surgical center regarding reports received by the board on a~~
13 ~~specific pharmacist, the board~~ Such report shall ~~provide~~ include the following information:

14 (A) Whether any reports have been received;

15 (B) The nature of each report; and

16 (C) The action which the board took on each report or if the board has taken action on the
17 report. [SHOULD WE DELETE THIS ENTIRE SECTION?]

18 (5) ~~Each report received shall be acknowledged in writing. The acknowledgment shall state~~
19 ~~that the report is being reviewed by the board or is being investigated and shall be referred~~
20 ~~to the board or an appropriate board subcommittee for consideration. The institution~~
21 ~~subsequently~~ The reporting entity shall be informed in writing as to whether the report has
22 ~~been dismissed by the board or is being referred to legal counsel for filing with the~~
23 ~~Administrative Hearing Commission or for other legal action. The institution may be~~
24 ~~notified~~ of the ultimate disposition of the report excluding judicial appeals and may be
25 provided with a copy of the decisions (if any) of the Administrative Hearing Commission
26 and the board.

27 (6) The provisions of this rule are declared severable. If any portion of this rule is held
28 invalid by a court of competent jurisdiction, the remaining provisions of this rule shall
29 remain in full force and effect, unless otherwise determined by a court of competent
30 jurisdiction.

31 *AUTHORITY: sections 338.140, RSMo Supp. 1989 and 383.133, RSMo 1986.* This rule*
32 *originally filed as 4 CSR 220-2.150. Original rule filed Aug. 4, 1987, effective Jan. 29,*
33 *1988. Moved to 20 CSR 2220-2.150, effective Aug. 28, 2006.*

34 **Original authority: 338.140, RSMo 1939, amended 1981, 1989 and 383.133, RSMo 1986.*
35
36
37

Missouri Revised Statutes

Chapter 383

Malpractice Insurance

Section 383.133

August 28, 2013

Reports by hospitals, ambulatory surgical centers, nursing homes, and licensing authorities, when, contents, limited use, penalty.

383.133. 1. The chief executive office or similarly empowered official of any hospital, ambulatory surgical center, as such terms are defined in chapter 197, temporary nursing staffing agency, nursing home, any nursing facility as such term is defined in chapter 198, or any entity that employs or contracts with licensed health care professionals to provide health care services to individuals shall report to the appropriate health care professional licensing authority any disciplinary action against any health care professional or the voluntary resignation of any health care professional against whom any complaints or reports have been made which might have led to disciplinary action.

2. All reports required by this section shall be submitted within fifteen days of the final disciplinary action and shall contain, but need not be limited to, the following information:

(1) The name, address and telephone number of the person making the report;

(2) The name, address and telephone number of the person who is the subject of the report;

(3) A description of the facts, including as much detail and information as possible, which gave rise to the issuance of the report, including the dates of occurrence deemed to necessitate the filing of the report;

(4) If court action is involved and known to the reporting agent, the identity of the court, including the date of filing and the docket number of the action.

3. Upon request, the licensing authority may furnish a report of any disciplinary action received by it under the provisions of this section to any entity required to report under this section. Such licensing authority may also furnish, upon request, a report of disciplinary action taken by the licensing authority to any other administrative or law enforcement agency acting within the scope of its statutory authority.

4. There shall be no liability on the part of, and no cause of action of any nature shall arise against any health care professional licensing authority or any entity required to report under this section, or any of their agents or employees for any action taken in good faith and without malice in carrying out the provisions of this section.

5. Neither a report required to be filed under subsection 2 of this section nor the record of any proceeding shall be used against a health care professional in any other administrative or judicial proceeding.

6. Violation of any provision of this section is an infraction.

(L. 1986 S.B. 663 § 2, A.L. 2007 H.B. 780 merged with S.B. 308, A.L. 2010 H.B. 2226, et al.)

(2001) Statements made in incident report by hospital to state board of nursing about nurse were not, in absence of actual proceedings pending against that nurse, entitled to absolute immunity from nurse's libel claim. *Haynes-Wilkinson v. Barnes-Jewish Hospital*, 131 F.Supp.2d 1140 (E.D.Mo.).

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#D5A July Strategic Goal Setting Proposals

- AHC Consulting
- Collaborative Strategies, Inc.
- People Centric Consulting Group

DISCUSSION

Does the Board want to conduct an official strategic goal setting meeting?
If so, would the Board like to meet in July?

SECTION E – OPEN

THERE ARE NO ITEMS FOR THIS SECTION