



California State Board of Pharmacy

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BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

LICENSING COMMITTEE REPORT

Stan Weisser, Licensee Member, Chairperson
Debbie Veale, Licensee Member, Vice-Chairperson
Lavanza Butler, Licensee Member
Ricardo Sanchez, Public Member
Albert Wong, Licensee Member

a. Discussion on Implementation of Provisions Contained in Senate Bill 1193 (Chapter 484, Statutes of 2016)

ATTACHMENT 1

Senate Bill (SB) 1193 (Chapter 484, Statutes of 2016) was signed by the Governor September 22, 2016. This bill contained the extension of the board's sunset date as well as many important changes to pharmacy law. Provided below were items brought to the committee for discussion and consideration. **Attachment 1** includes relevant portions of SB 1193.

1. Incorporate Trusts as an Entity Authorized to Obtain Licensure, Proposal to Amend CCR section 1709, Names of Owners and Pharmacist In Charge

ATTACHMENT 2

Background

For several meetings, the committee has discussed the issue of trust ownership, primarily related to pharmacy ownership structures. During the July 2016 Board Meeting, the board approved statutory changes as the first step to allowing such ownership. These changes were included in Business and Professions Code (BPC) Sections 4035, 4201, 4302, 4307 and 4308.

Committee Discussion and Recommendation

The committee was advised that board staff was working towards full implementation; including review of the board's current regulations to determine if changes are necessary. As part of its discussion the committee heard a brief presentation by Deputy Attorney General Matthew Heyn as well as reviewed proposed regulation changes to Section 1706 of Title 16, California Code of Regulations (CCR). The committee discussed the basis for the proposed changes and provided direction to staff to update the language. The committee requested that the proposal be limited to changes necessary to implement the trust ownership.

Committee Recommendation: Approve regulation proposed regulation change to CCR section 1709 that includes the provisions relating to the trust ownership as well as formatting changes. Remove provisions that are not related to the trust ownership.

Attachment 2 includes draft regulation language that includes the requested changes of the committee as well as changes offered by counsel to ensure consistency with terms and structure.

2. Licensure of Outsourcing Facilities

Background

Under federal law an outsourcing facility is a facility that compounds human drugs if the following conditions are met:

1. The facility compounds sterile drugs
2. The facility has elected to register as an outsourcing facility
3. The facility complies with all of the requirements of section 503B
4. The facility is not licensed as a pharmacy, but may be compounding under the direct supervision of a license pharmacist
5. The compounding may or may not be for identified individual patients.

The FDA notes that registration as an outsourcing facility does not mean that a facility is in compliance with good manufacturing practice requirements or the other requirements of Section 503B. There are currently 65 facilities registered with the FDA, four of which are in California.

Committee Discussion and Recommendation

The committee briefly discussed the provisions in SB 1193 which establish the board's ability to issue and regulate outsourcing facilities that provide compounded medications in California. The committee noted that, similar to the board's regulation of sterile compounding pharmacies, outsourcing facilities will be inspected prior to issuance of a license as well as prior to renewal.

The committee was advised that necessary changes to the board's computer systems will most likely not occur until July 1, 2018. As such, staff is developing an implementation strategy that includes a manual process for the near future and a long term solution, including modifications to our computer systems (which will automate some functions) that will begin when department resources are available.

The committee was also provided with the timetable for releasing the application and instructions to allow for submissions in advance of the January 1, 2017, effective date.

The committee did not take action on this item.

3. Email Notification List Requirement

ATTACHMENT 3

Background

For many years the board has used an e-mail subscriber alert system as a quick and efficient way to communicate with licensees. Under current law (BPC section 4013) businesses licensed by the board are required to join the board's email notification list within 60 days of obtaining a license or at the time of renewal. Further this section requires the facility to update its e-mail address within 30 days of a change and establishes provisions to allow for a single "subscription" for the owner of two or more facilities.

Committee Discussion and Recommendation

The committee noted that under proposed provisions in SB 1193, effective July 1, 2017, BPC section 4013 will be amended to establish a similar requirement on individuals licensed by the board including:

- Pharmacist
- Intern
- Pharmacy Technicians
- Designated Representative-3PL

The committee discussed the implementation efforts underway including:

1. Development of inserts advising licensees of the requirement when an initial license is issued.
2. Revision of the renewal form to include a reminder for licensees.
3. Drafting of a newsletter article for *The Script*.

Also, as part of its discussion, the committee discussed a drafting error with the provision in that the designated representative license category was inadvertently not included. The committee reviewed a statutory proposal that would fix the drafting error and noted that the proposal could be included as an omnibus provision next year as an efficient way to address this error.

Committee Recommendation: Approval of the proposed statutory change to amend section 4013 (d)(1) to include designated representatives to the list of individuals required to join email notification list.

Attachment 3 includes the proposed statutory amendment.

b. Discussion and Consideration of Possible Revisions to the Board's Fee Schedule (Title 16 CCR §1749) to Implement the Provisions Contained in Senate Bill 1039 (Chapter 799, Statutes of 2016)

ATTACHMENT 4

Background

As the board has been discussing for several years, its budget includes a structural imbalance in that its authorized expenditures exceed its revenue. To address this issue the board worked with the Department of Consumer Affairs on a fee analysis, where the department determined the cost the board incurs to provide various services. The results of this analysis were included in the board's Sunset Report as well as served as the baseline for the development of the legislative proposal to recast the board's fees. This proposal was included in SB 1039 and was signed by the governor. The new fees will take effect July 1, 2017.

Committee Discussion and Recommendation

The committee noted that because the fee analysis did not include all fees, a regulation is necessary to provide the board's regulated public with a clear understanding of the fees that will be assessed for the various services, including application and renewal as well as delinquent fees. The committee discussed that the ultimate goal is to have the regulations in effect by July 1, 2017.

Committee Recommendation: Assuming the governor signs SB 1039, approve the draft regulation proposal to amend CCR section 1749.

Recent Update

The Governor signed the measure on September 29, 2016. Also, the regulation language was updated to correct a few drafting errors that were identified by counsel.

Attachment 4 includes draft regulation language as well as the provisions in SB 1039.

c. **Discussion and Consideration of Next Steps Necessary to Implement Senate Bill 952 Relating to Pharmacy Technician Licensure Requirements (SB 952, Chapter 150, Statutes of 2016) Including Proposal to Add Section 1793.65 to Title 16 CCR.**

ATTACHMENT 5

Background

BPC section 4202 provides the general pathways to licensure as a pharmacy technician. SB 952 modified the requirements to expand the certification requirement to include other agencies. Because of the language in the measure, the board is required to approve certification programs.

The committee has previously heard presentations on two certification programs, one offered by the Pharmacy Technician Certification Board (PTCB) and a second one offered by the National Healthcare Association (NHA) known as the ExCPT. Further, as part of its March 2016 committee meeting, the committee compared the two certification programs. During these presentations the committee was advised that both certification programs are accredited by the National Commission for Certifying Agencies.

Committee Discussion and Recommendation

The committee discussed actions necessary to facilitate implementation of this new provision as the statutory language now requires the board to approve pharmacy technician certification programs. The committee discussed draft regulation language that could be used to specify the pharmacy technician certification programs approved by board, including both the PTCB and the ExCPT.

The committee also discussed the need to have an interim approval process to ensure the certification pathway to licensure can be achieved prior to implementation of the regulation.

The committee noted its current efforts to reevaluate the pharmacy technician program and determined that it would be appropriate to include an expiration date on its approval of the programs. This will ensure the board has the opportunity to reevaluate programs, which seems appropriate given both the committee as well as the board's consideration of possible changes to the pharmacy technician program in California.

The committee heard public comment in support of its discussion and was advised that there was a drafting error in the proposed regulation language in name of the certification program offered by NHA.

Committee Recommendation: Recommend to the board to approve the proposed regulation language with an amendment to include an expiration date of January 1, 2021, and to correct the name of the NHA program.

Committee Recommendation: Recommend interim approval of the NHA's ExCPT and the PTCB certification programs until the effective date of the regulation.

Attachment 5 includes the chaptered version of SB 952, the revised draft regulation language as well as a letter on behalf of NHA requesting board approval of their certification program.

d. Discussion and Consideration of Amendment to Title 16, CCR section 1780 et seq., to include Operational Requirements for Third-Party Logistics Providers

ATTACHMENT 6

Background

At the July 2015 Board Meeting, the board approved proposed regulation text to amend Title 16 CCR section 1780 et seq., to establish the regulatory framework for Third-Party Logistics Providers. The proposed regulations would establish the minimum standards by which such providers would need to comply which are consistent with current minimum standards for wholesalers.

Staff later identified that additional modification may be necessary. As such, the matter was returned to the Licensing Committee for review.

Committee Discussion and Recommendation

The committee discussed the proposal and noted that the primary change in the current version of the proposed language is the removal of a reference to a prior version of the United States Pharmacopoeia Standards in Section 1780(b). The committee was advised that board staff and counsel have confirmed that compliance with the USP standards is already established as a requirement in federal law, both in the U.S. Code as well as in the Code of Federal Regulations. As such removal of the reference is appropriate.

Committee Recommendation: Recommend to the board approval of the proposed regulation language in section 1780 et seq.

Included in **Attachment 6** is the proposed language approved by the Licensing Committee.

e. Presentation by the Office of Statewide Health Planning and Development (OSHPD) on the Health Professions Education Foundation

ATTACHMENT 7

Background

In 2002 the California Pharmacist Scholarship and Loan Repayment Program was established with OSHPD. To fund the program, pharmacist and pharmacies can voluntarily contribute \$25.00 as part of the renewal of a licensure. The fund is designed to provide scholarships or loan forgiveness to pharmacists and pharmacy students who served in medically underserved communities.

Committee Discussion and Recommendation

The committee heard a presentation from a representative of OSHPD on the Health Professions Education Foundation, which is administered through OSHPD. The presentation included information on the foundation which awards scholarships and loan repayments to qualified health professionals, including pharmacists. The committee learned about the application and eligibility requirements and was advised that two pharmacists were awarded loan repayments in fiscal year 2015/16.

As part of its discussion, the committee was advised that OSHPD currently does not have staff available to administer the California Pharmacist Scholarship and Loan Repayment Program.

A copy of the presentation provided to the committee is provided in **Attachment 7**.

f. Discussion and Consideration of Pharmacist Examination Matters

- 1. The National Association of Boards of Pharmacy's Change in Policy Relating to the 91-Day Waiting Period for Candidates that Fail the NAPLEX**
- 2. Evaluation of the California Practice Standards and Jurisprudence Examination for Pharmacists (CPJE)**

ATTACHMENT 8

Background

BPC section 4200 establishes the requirements for licensure as a pharmacist including passage of the North America Pharmacist Licensure Examination (NAPLEX).

The BPC section 4200.4 specifies that an applicant that fails the national examination may not retake the examination for at least 90 days or for a period established by regulation adopted by the board in consultation with the Office of Professional Examination Services (OPES).

Committee Discussion and Recommendation

The committee was advised that in late July 2016 the NABP released information about changes in the administration of the NAPLEX including a change in the current waiting period a candidate must wait to retake the examination. (Currently, an individual that fails that NAPLEX must wait 90 days both under NABP rules as well as pharmacy law.)

The committee discussed the proposed changes in the NAPLEX as well as the upcoming change in the NAPLEX waiting period reduced from 90 days to 45 days. The committee discussed that California law will still require a 90-day waiting period for the NAPLEX. As part of its discussion the committee discussed if the proposed change to the waiting period is appropriate. The committee also discussed if the board should consider a change to the waiting period for the CPJE. As provided in the statute, the committee discussed that any change to the current waiting period for the NAPLEX would require consultation with OPES.

Committee Recommendation: Work with OPES to evaluate the exams (NAPLEX & CPJE) and determine the appropriate waiting period. Refer the matter back to the Licensing Committee for future discussion based on the outcome of the work with OPES.

Attachment 8 includes a copy of the notification from the NABP as well as the relevant law section.

g. Consideration of Request from Marshall B. Ketchum University, College of Pharmacy, for Recognition by the Board under Title 16, California Code of Regulations Section 1719 for Purposes of Issuing Intern Licenses

ATTACHMENT 9

Background

Current regulation, Title 16 CCR 1719, states that a "recognized school of pharmacy" means a school accredited, or granted candidate status by the Accreditation Council for Pharmacy Education (ACPE). Specifically:

1719. Recognized Schools of Pharmacy.

As used in this division, "recognized school of pharmacy" means a school of pharmacy accredited, or granted candidate status, by the Accreditation Council for Pharmacy Education or otherwise recognized by the board.

There are three levels to full ACPE accreditation status for new schools of pharmacy: pre-candidate status, candidate status and full accreditation. A school may be granted candidate status once the school has produced its first class of graduates. At this point, section 1719 allows the board to issue intern licenses to current and future students. However, before possessing candidate status and while students are moving through the program at a new school, the school may have pre-candidate status with ACPE. This means that the school is progressing to meet the ACPE accreditation standards, but has not yet completed the process nor graduated its first class. In such cases, the board must recognize the school for purposes of issuing an intern license in order to allow students to secure the training expected by ACPE.

ACPE does not award pre-candidate status to new schools that are not adequately progressing towards full accreditation. The Marshal B. Ketchum University, College of Pharmacy has been granted pre-candidate status by the ACPE. In order for the school's students to secure the training they need, the students need intern licenses. Lacking ACPE candidate status, the board cannot currently issue these licenses to students.

On September 12, 2016, the board received a request from Dr. Edward Fisher, Professor and Dean, asking for board recognition of its program for purposes of issuing intern pharmacist licenses to students attending their program.

The ACPE confirmed that the university possesses pre-candidate status.

Committee Discussion and Recommendation

The committee discussed the request and was advised that Vice-Chairperson Debbie Veale participated in part of the ACPE review of the school. The committee also noted the rigorous process used by the ACPE to evaluate schools of pharmacy for accreditation and reaccreditation.

Committee Recommendation: Recommend to the board recognition of Marshall B. Ketchum University, College of Pharmacy for purposes of issuing intern permits

A copy of the letter from the school requesting recognition by the board as well as program information is provided in **Attachment 9**.

h. Licensing Statistics

ATTACHMENT 10

Licensing Statistics for July 1, 2016 – September 30, 2016

Attachment 10 includes the licensing statistics for the first 3 months of the fiscal year. The board has received 5,985 applications including:

- 1,548 pharmacy technicians
- 1,223 intern pharmacists
- 607 pharmacist exam applications
- 951 initial pharmacist licensing applications

The board has issued 3,357 licenses and renewed 16,322 licenses. The board currently has 138,799 active licenses including:

- 44,167 pharmacists
- 6,625 intern pharmacists
- 73,173 pharmacy technicians
- 6,566 pharmacies
- 519 hospitals and exempt hospitals

The board continues to work with the department on implementing Licensing Performance Measures (LPM) processing times for the boards and bureaus. Staff is currently validating the board's monthly LPM reports for FY 2015/2016 and is working with the department on resolving data conflicts within the reports. The LPM should be in production soon. The LPM reports will provide more detail on the board's processing times, deficiency rates, etc.

General processing information by license type is provided below and as of October 7, 2016. The numbers reflect the time an application is received by the board through the time either a deficiency letter is issued or a license is issued. If an incomplete application is received, there will be additional processing time involved.

Site Application Type	Number of Days
Pharmacy	25
Nonresident Pharmacy	37
Sterile Compounding	15
Nonresident Sterile Compounding	11
Hospital	current
Clinic	15
Wholesaler	21
Nonresident Wholesaler	7
Third-Party Logistics Provider	current
Nonresident Third-Party Logistics Provider	current

In addition to general processing times, the processing time for evaluating deficiency mail of site licenses is averaging between 2 and 37 days, depending on the license type, with the exception: pharmacy and nonresident pharmacy deficiency mail is at 59 days and staff is working to reduce this number to an acceptable range.

i. Future Committee Meeting Dates

Following are the committee meeting dates for 2017. The location for these meetings has not yet been determined.

- January 10, 2017
- April 4, 2017 (Pharmacy Technician Summit)
- June 29, 2017

- September 19, 2017

ATTACHMENT 11 includes the full meeting summary of the committee meeting.

Attachment 1

SEC. 11. *Section 2988.5 is added to the Business and Professions Code, to read:*

2988.5. (a) The board may issue, upon an application prescribed by the board and payment of a fee not to exceed seventy-five dollars (\$75), a retired license to a psychologist who holds a current license issued by the board, or one capable of being renewed, and whose license is not suspended, revoked, or otherwise restricted by the board or subject to discipline under this chapter.

(b) The holder of a retired license issued pursuant to this section shall not engage in any activity for which an active license is required. A psychologist holding a retired license shall be permitted to use the title "psychologist, retired" or "retired psychologist." The designation of retired shall not be abbreviated in any way.

(c) A retired license shall not be subject to renewal.

(d) The holder of a retired license may apply to obtain an active status license as follows:

(1) If that retired license was issued less than three years prior to the application date, the applicant shall meet all of the following requirements:

(A) Has not committed an act or crime constituting grounds for denial or discipline of a license.

(B) Pays the renewal fee required by this chapter.

(C) Completes the continuing professional development required for the renewal of a license within two years of the date of application for restoration.

(D) Complies with the fingerprint submission requirements established by the board.

(2) Where the applicant has held a retired license for three or more years, the applicant shall do all of the following:

(A) Submit a complete application for a new license.

(B) Take and pass the California Psychology Law and Ethics Examination.

(C) Pay all fees required to obtain a new license.

(D) Comply with the fingerprint submission requirements established by the board.

(E) Be deemed to have met the educational and experience requirements of subdivisions (b) and (c) of Section 2914.

(F) Establish that he or she has not been subject to denial or discipline of a license.

SEC. 12. *Section 4001 of the Business and Professions Code is amended to read:*

4001. (a) There is in the Department of Consumer Affairs a California State Board of Pharmacy in which the administration and enforcement of this chapter is vested. The board consists of 13 members.

(b) The Governor shall appoint seven competent pharmacists who reside in different parts of the state to serve as members of the board. The Governor shall appoint four public members, and the Senate Committee on Rules and the Speaker of the Assembly shall each appoint a public member who shall not be a licensee of the board, any other board under this division, or any board referred to in Section 1000 or 3600.

(c) At least five of the seven pharmacist appointees to the board shall be pharmacists who are actively engaged in the practice of pharmacy. Additionally, the membership of the board shall include at least one pharmacist representative from each of the following practice settings: an acute care hospital, an independent community pharmacy, a chain community pharmacy, and a long-term health care or skilled nursing facility. The pharmacist appointees shall also include a pharmacist who is a member of a labor union that represents pharmacists. For the purposes of this subdivision, a "chain community pharmacy" means a chain of 75 or more stores in California under the same ownership, and an "independent community pharmacy" means a pharmacy owned by a person or entity who owns no more than four pharmacies in California.

(d) Members of the board shall be appointed for a term of four years. No person shall serve as a member of the board for more than two consecutive terms. Each member shall hold office until the appointment and qualification of his or her successor or until one year shall have elapsed since the expiration of the term for which the member was appointed, whichever first occurs. Vacancies occurring shall be filled by appointment for the unexpired term.

(e) Each member of the board shall receive a per diem and expenses as provided in Section 103.

(f) This section shall remain in effect only until January 1, ~~2017, 2021~~, and as of that date is ~~repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.~~ *repealed*. Notwithstanding any other ~~provision of~~ law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature.

SEC. 13. Section 4003 of the Business and Professions Code is amended to read:

4003. (a) The board, with the approval of the director, may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter. The executive officer may or may not be a member of the board as the board may determine.

(b) The executive officer shall receive the compensation as established by the board with the approval of the Director of Finance. The executive officer shall also be entitled to travel and other expenses necessary in the performance of his or her duties.

(c) The executive officer shall maintain and update in a timely fashion records containing the names, titles, qualifications, and places of business of all persons subject to this chapter.

(d) The executive officer shall give receipts for all money received by him or her and pay it to the department, taking its receipt therefor. Besides the duties required by this chapter, the executive officer shall perform other duties pertaining to the office as may be required of him or her by the board.

(e) This section shall remain in effect only until January 1, ~~2017, 2021~~, and as of that date is ~~repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.~~ *repealed*.

SEC. 14. Section 4013 of the Business and Professions Code is amended to read:

4013. (a) Any facility licensed by the board shall join the board's ~~e-mail~~ *email* notification list within 60 days of obtaining a license or at the time of license renewal.

(b) Any facility licensed by the board shall update its ~~e-mail~~ *email* address with the board's ~~e-mail~~ *email* notification list within 30 days of a change in the facility's ~~e-mail~~ *email* address.

(c) An owner of two or more facilities licensed by the board may comply with subdivisions (a) and (b) by subscribing a single ~~e-mail~~ *email* address to the board's ~~e-mail~~ *email* notification list, where the owner maintains an electronic notice system within all of its licensed facilities that, upon receipt of an ~~e-mail~~ *email* notification from the board, immediately transmits electronic notice of the same notification to all of its licensed facilities. If an owner chooses to comply with this section by using such an electronic notice system, the owner shall register the electronic notice system with the board by July 1, 2011, or within 60 days of initial licensure, whichever is later, informing the board of the single ~~e-mail~~ *email* address to be utilized by the owner, describing the electronic notice system, and listing all facilities to which immediate notice will be provided. The owner shall update its ~~e-mail~~ *email* address with the board's ~~e-mail~~ *email* notification list within 30 days of any change in the owner's ~~e-mail~~ *email* address.

(d) (1) Each pharmacist, intern pharmacist, pharmacy technician, designated representative-3PL licensed in this state shall join the board's email notification list within 60 days of obtaining a license or at the time of license renewal.

(2) Each pharmacist, intern pharmacist, pharmacy technician, designated representative, and designated representative-3PL licensed in this state shall update his or her email address with the board's email notification list within 30 days of a change in the licensee's email address.

(3) The email address provided by a licensee shall not be posted on the board's online license verification system.

(4) The board shall, with each renewal application, remind licensees of their obligation to report and keep current their email address with the board's email notification list.

~~(d)~~ (5) This ~~section~~ *subdivision* shall become operative on July 1, ~~2010~~, 2017.

SEC. 15. Section 4034 is added to the Business and Professions Code, to read:

4034. "Outsourcing facility" means a facility that meets all of the following:

(a) Is located within the United States of America at one address that is engaged in the compounding of sterile drugs and nonsterile drugs.

(b) Has registered as an outsourcing facility with the federal Food and Drug Administration under Section 503B of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. Sec. 353b).

(c) Is doing business within or into California.

(d) Is licensed with the board as an outsourcing facility pursuant to Article 7.7 (commencing with Section 4129).

SEC. 16. Section 4035 of the Business and Professions Code is amended to read:

4035. "Person" ~~includes~~ includes, but is not limited to, firm, association, partnership, corporation, limited liability company, state governmental agency, trust, or political subdivision.

SEC. 17. Section 4081 of the Business and Professions Code is amended to read:

*4081. (a) All records of manufacture and of sale, acquisition, receipt, shipment, or disposition of dangerous drugs or dangerous devices shall be at all times during business hours open to inspection by authorized officers of the law, and shall be preserved for at least three years from the date of making. A current inventory shall be kept by every manufacturer, wholesaler, third-party logistics provider, pharmacy, veterinary food-animal drug retailer, *outsourcing facility*, physician, dentist, podiatrist, veterinarian, laboratory, clinic, hospital, institution, or establishment holding a currently valid and unrevoked certificate, license, permit, registration, or exemption under Division 2 (commencing with Section 1200) of the Health and Safety Code or under Part 4 (commencing with Section 16000) of Division 9 of the Welfare and Institutions Code who maintains a stock of dangerous drugs or dangerous devices.*

(b) The owner, officer, and partner of a pharmacy, wholesaler, third-party logistics provider, or veterinary food-animal drug retailer shall be jointly responsible, with the pharmacist-in-charge, responsible manager, or designated representative-in-charge, for maintaining the records and inventory described in this section.

(c) The pharmacist-in-charge, responsible manager, or designated representative-in-charge shall not be criminally responsible for acts of the owner, officer, partner, or employee that violate this section and of which the pharmacist-in-charge, responsible manager, or designated representative-in-charge had no knowledge, or in which he or she did not knowingly participate.

SEC. 18. Section 4105.5 is added to the Business and Professions Code, to read:

4105.5. (a) For purposes of this section, an "automated drug delivery system" has the same meaning as that term is defined in paragraph (1) of subdivision (a) of Section 1261.6 of the Health and Safety Code.

(b) Except as provided by subdivision (e), a pharmacy that owns or provides dangerous drugs dispensed through an automated drug delivery system shall register the automated drug delivery system by providing the board in writing with the location of each device within 30 days of installation of the device, and on an annual basis as part of the license renewal pursuant to subdivision (a) of Section 4110. The pharmacy shall also advise the board in writing within 30 days if the pharmacy discontinues operating an automated drug delivery system.

(c) A pharmacy may only use an automated drug delivery system if all of the following conditions are satisfied:

(1) Use of the automated drug delivery system is consistent with legal requirements.

(2) The pharmacy's policies and procedures related to the automated drug delivery system to include appropriate security measures and monitoring of the inventory to prevent theft and diversion.

(3) The pharmacy reports drug losses from the automated drug delivery system to the board as required by law.

(4) The pharmacy license is unexpired and not subject to disciplinary conditions.

(d) The board may prohibit a pharmacy from using an automated drug delivery system if the board determines that the conditions provided in subdivision (c) are not satisfied. If such a determination is made, the board shall provide the pharmacy with written notice including the basis for the determination. The pharmacy may request an office conference to appeal the board's decision within 30 days of receipt of the written notice. The executive officer or designee may affirm or overturn the prohibition as a result of the office conference.

(e) An automated drug delivery system operated by a licensed hospital pharmacy as defined in Section 4029 for doses administered in a facility operated under a consolidated license under Section 1250.8 of the Health and Safety Code shall be exempt from the requirements of subdivision (b).

SEC. 19. Section 4107 of the Business and Professions Code is amended to read:

4107. (a) The board ~~may~~ *shall* not issue more than one site license to a single premises except as follows:

(1) To issue a veterinary food-animal drug retailer license to a wholesaler pursuant to Section 4196.

(2) To issue a license to compound sterile ~~injectable~~ drugs to a pharmacy pursuant to Section ~~4127.1. 4127.1 or 4127.2.~~

(3) To issue a centralized hospital packaging license pursuant to Section 4128.

(b) For the purposes of this subdivision, "premises" means a location with its own address and an independent means of ingress and egress.

SEC. 20. Section 4110 of the Business and Professions Code is amended to read:

4110. (a) No person shall conduct a pharmacy in the State of California unless he or she has obtained a license from the board. A license shall be required for each pharmacy owned or operated by a specific person. A separate license shall be required for each of the premises of any person operating a pharmacy in more than one location. The license shall be renewed annually. The board may, by regulation, determine the circumstances under which a license may be transferred.

(b) The board may, at its discretion, issue a temporary ~~permit, when the ownership of a pharmacy is transferred from one person to another,~~ *permit* upon the conditions and for any periods of time as the board determines to be in the public interest. A temporary permit fee shall be required in an amount established by the board as specified in subdivision (a) of Section 4400. When needed to protect public safety, a temporary permit may be issued for a period not to exceed 180 days, and may be issued subject to terms and conditions the board deems necessary. If the board determines a temporary permit was issued by mistake or denies the application for a permanent license or registration, the temporary license or registration shall terminate upon either personal service of the notice of termination upon the permitholder or service by certified mail, return receipt requested, at the permitholder's address of record with the board, whichever comes first. Neither for purposes of retaining a temporary permit nor for purposes of any disciplinary or license denial proceeding before the board shall the temporary permitholder be deemed to have a vested property right or interest in the permit.

~~(c) The board may allow the temporary use of a mobile pharmacy when a pharmacy is destroyed or damaged, the mobile pharmacy is necessary to protect the health and safety of the public, and the following conditions are met:~~

~~(1) The mobile pharmacy shall provide services only on or immediately contiguous to the site of the damaged or destroyed pharmacy.~~

~~(2) The mobile pharmacy is under the control and management of the pharmacist-in-charge of the pharmacy that was destroyed or damaged.~~

~~(3) A licensed pharmacist is on the premises while drugs are being dispensed.~~

~~(4) Reasonable security measures are taken to safeguard the drug supply maintained in the mobile pharmacy.~~

~~(5) The pharmacy operating the mobile pharmacy provides the board with records of the destruction of, or damage to, the pharmacy and an expected restoration date.~~

~~(6) Within three calendar days of restoration of the pharmacy services, the board is provided with notice of the restoration of the permanent pharmacy.~~

~~(7) The mobile pharmacy is not operated for more than 48 hours following the restoration of the permanent pharmacy.~~

(c) The board may allow the temporary use of a mobile pharmacy when a pharmacy is destroyed or damaged, the mobile pharmacy is necessary to protect the health and safety of the public, and the following conditions are met:

(1) The mobile pharmacy shall provide services only on or immediately contiguous to the site of the damaged or destroyed pharmacy.

(2) The mobile pharmacy is under the control and management of the pharmacist-in-charge of the pharmacy that was destroyed or damaged.

(3) A licensed pharmacist is on the premises while drugs are being dispensed.

(4) Reasonable security measures are taken to safeguard the drug supply maintained in the mobile pharmacy.

(5) The pharmacy operating the mobile pharmacy provides the board with records of the destruction of, or damage to, the pharmacy and an expected restoration date.

(6) Within three calendar days of restoration of the pharmacy services, the board is provided with notice of the restoration of the permanent pharmacy.

(7) The mobile pharmacy is not operated for more than 48 hours following the restoration of the permanent pharmacy.

SEC. 21. Section 4119.1 of the Business and Professions Code is amended to read:

4119.1. (a) A pharmacy may provide pharmacy services to a health facility licensed pursuant to subdivision (c), (d), or both, of Section 1250 of the Health and Safety Code, through the use of an automated drug delivery system that need not be located at the same location as the pharmacy.

(b) Drugs stored in an automated drug delivery system shall be part of the inventory of the pharmacy providing pharmacy services to that facility, and drugs dispensed from the pharmacy system shall be considered to have been dispensed by that pharmacy.

(c) (1) The pharmacy shall maintain records of the acquisition and disposition of dangerous drugs and dangerous devices stored in the automated drug delivery system separate from other pharmacy records.

(2) The pharmacy shall own and operate the automated drug delivery system.

(3) The pharmacy shall provide training regarding the operation and use of the automated drug delivery system to both pharmacy and health facility personnel using the system.

(4) The pharmacy shall operate the automated drug delivery system in compliance with Section 1261.6 of the Health and Safety Code.

(d) The operation of the automated drug delivery system shall be under the supervision of a licensed pharmacist. To qualify as a supervisor for an automated drug delivery system, the pharmacist need not be physically present at the site of the automated drug delivery system and may supervise the system electronically.

(e) ~~Nothing in this~~ This section shall *not* be construed to revise or limit the use of automated drug delivery systems as permitted by the board in any licensed health facility other than a facility defined in subdivision (c) or (d), or both, of Section 1250 of the Health and Safety Code.

SEC. 22. Section 4126.9 is added to the Business and Professions Code, to read:

4126.9. (a) A pharmacy that issues a recall notice regarding a nonsterile compounded drug product shall, in addition to any other duties, contact the recipient pharmacy, prescriber, or patient of the recalled drug and the board within 12 hours of the recall notice if both of the following apply:

(1) Use of or exposure to the recalled drug may cause serious adverse health consequences or death.

(2) The recalled drug was dispensed, or is intended for use, in this state.

(b) A recall notice issued pursuant to subdivision (a) shall be made as follows:

(1) If the recalled drug was dispensed directly to the patient, the notice shall be made to the patient.

(2) If the recalled drug was dispensed directly to the prescriber, the notice shall be made to the prescriber, who shall ensure the patient is notified.

(3) If the recalled drug was dispensed directly to a pharmacy, the notice shall be made to the pharmacy, which shall notify the prescriber or patient, as appropriate. If the pharmacy notifies the prescriber, the prescriber shall ensure the patient is notified.

(c) A pharmacy that has been advised that a patient has been harmed by using a nonsterile compounded product potentially attributable to the pharmacy shall report the event to MedWatch within 72 hours of the pharmacy being advised.

SEC. 23. Section 4127 of the Business and Professions Code is amended to read:

4127. (a) A pharmacy that compounds sterile drug products ~~for injection, administration into the eye, or inhalation~~ shall possess a sterile compounding pharmacy license as provided in this article.

(b) The board shall adopt regulations in accordance with the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code) to establish policies, guidelines, and procedures to implement this article.

(c) The board shall review any formal revision to General Chapter 797 of the United States Pharmacopeia and The National Formulary (USP–NF), relating to the compounding of sterile preparations, not later than 90 days after the revision becomes official, to determine whether amendments are necessary for the regulations adopted by the board pursuant to subdivision (b).

~~(d) This section shall become operative on July 1, 2014.~~

SEC. 24. Section 4127.3 of the Business and Professions Code is amended to read:

4127.3. (a) Whenever the board has a reasonable belief, based on information obtained during an inspection or investigation by the board, that a pharmacy compounding ~~injectable~~ sterile drug products poses an immediate threat to the public health or safety, the executive officer of the board may issue an order to the pharmacy to immediately cease and desist from compounding ~~injectable~~ sterile drug products. The cease and desist order shall remain in effect for no more than 30 days or the date of a hearing seeking an interim suspension order, whichever is earlier.

(b) Whenever the board issues a cease and desist order pursuant to subdivision (a), the board shall immediately issue the owner a notice setting forth the acts or omissions with which the owner is charged, specifying the pertinent code section or sections.

(c) The order shall provide that the owner, within 15 days of receipt of the notice, may request a hearing before the president of the board to contest the cease and desist order. Consideration of the owner's contest of the cease and desist order shall comply with the requirements of Section 11425.10 of the Government Code. The hearing shall be held no later than five days from the date the request of the owner is received by the board. The president shall render a written decision within five days of the hearing. In the absence of the president of the board, the vice president of the board may conduct the hearing permitted by this subdivision. Review of the decision of the president of the board may be sought by the owner or person in possession or control of the pharmacy pursuant to Section 1094.5 of the Code of Civil Procedure.

(d) Failure to comply with a cease and desist order issued pursuant to this section shall be unprofessional conduct.

SEC. 25. Section 4127.7 of the Business and Professions Code is amended to read:

4127.7. ~~On and after July 1, 2005, a~~ A pharmacy shall compound sterile ~~injectable~~ products from one or more nonsterile ingredients in one of the following environments:

(a) An ISO class 5 laminar airflow hood within an ISO class 7 cleanroom. The cleanroom must have a positive air pressure differential relative to adjacent areas.

(b) An ISO class 5 cleanroom.

(c) A barrier isolator that provides an ISO class 5 environment for compounding.

SEC. 26. Section 4127.8 of the Business and Professions Code is amended to read:

4127.8. The board may, at its discretion, issue a temporary license to compound ~~injectable sterile drug products, when the ownership of a pharmacy that is licensed to compound injectable sterile drug products is transferred from one person to another,~~ *sterile drug products* upon the conditions and for any periods of time as the board determines to be in the public interest. A temporary license fee shall be required in an amount established by the board as specified in subdivision (u) of Section 4400. When needed to protect public safety, a temporary license may be issued for a period not to exceed 180 days, and may be issued subject to terms and conditions the board deems necessary. If the board determines a temporary license was issued by mistake or denies the application for a permanent license, the temporary license shall terminate upon either personal service of the notice of termination upon the licenseholder or service by certified mail, return receipt requested at the licenseholder's address of record with the board, whichever comes first. Neither for purposes of retaining a temporary license nor for purposes of any disciplinary or license denial proceeding before the board shall the temporary licenseholder be deemed to have a vested property right or interest in the license.

SEC. 27. Section 4127.9 of the Business and Professions Code is amended to read:

4127.9. (a) A pharmacy licensed pursuant to Section 4127.1 or ~~4127.2, including a pharmacy that is exempt from licensure pursuant to subdivision (d) of Section 4127.1 and subdivision (c) of Section 4127.2, that~~ *4127.2 that* issues a recall notice regarding a sterile compounded drug shall, in addition to any other duties, contact the recipient pharmacy, prescriber, or patient of the recalled drug and the board as soon as possible within 12 hours of the recall notice if both of the following apply:

(1) Use of or exposure to the recalled drug may cause serious adverse health consequences or death.

(2) The recalled drug was dispensed, or is intended for use, in this state.

(b) A recall notice issued pursuant to subdivision (a) shall be made as follows:

(1) If the recalled drug was dispensed directly to the patient, the notice shall be made to the patient.

(2) If the recalled drug was dispensed directly to the prescriber, the notice shall be made to the prescriber, who shall ensure the patient is notified.

(3) If the recalled drug was dispensed directly to a pharmacy, the notice shall be made to the pharmacy, who shall notify the prescriber or patient, as appropriate. If the pharmacy notifies the prescriber, the prescriber shall ensure the patient is notified.

SEC. 28. Section 4128.6 of the Business and Professions Code is amended to read:

4128.6. All compounding and packaging functions specified in Section 4128 shall be performed only in the licensed centralized hospital packaging pharmacy and that pharmacy shall comply with all applicable federal and state statutes and regulations, including, but not limited to, regulations regarding compounding and, when appropriate, sterile ~~injectable~~ compounding.

SEC. 29. *Article 7.7 (commencing with Section 4129) is added to Chapter 9 of Division 2 of the Business and Professions Code, to read:*

Article 7.7. Outsourcing Facilities

4129. (a) A facility licensed as an outsourcing facility with the federal Food and Drug Administration (FDA) shall be concurrently licensed with the board as an outsourcing facility if it compounds sterile medication or nonsterile medication for nonpatient-specific distribution within or into California.

(b) A facility premises licensed with the board as a sterile compounding pharmacy shall not be concurrently licensed with the board as an outsourcing facility at the same location.

(c) The board may adopt regulations in accordance with the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code) to establish policies, guidelines, and procedures to implement this article.

(d) The board shall review any formal requirements or guidance documents developed by the FDA regarding outsourcing facilities within 90 days after their release in order to determine whether revisions are necessary for any regulations promulgated by the board.

(e) An outsourcing facility licensed by the board shall not perform the duties of a pharmacy, such as filling individual prescriptions for individual patients.

4129.1. (a) An outsourcing facility that is licensed with the federal Food and Drug Administration (FDA) and with an address in this state shall also be licensed by the board as an outsourcing facility before doing business within this state. The license shall be renewed annually and is not transferable.

(b) An outsourcing facility shall compound all sterile products and nonsterile products in compliance with regulations issued by the board and with federal current good manufacturing practices applicable to outsourcing facilities.

(c) An outsourcing facility license shall not be issued or renewed until the location is inspected by the board and found in compliance with this article and regulations adopted by the board.

(d) An outsourcing facility license shall not be issued or renewed until the board does all of the following:

(1) Prior to inspection, reviews a current copy of the outsourcing facility's policies and procedures for sterile compounding and nonsterile compounding.

(2) Is provided with copies of all federal and state regulatory agency inspection reports, as well as accreditation reports, and certification reports of facilities or equipment of the outsourcing facility's premises conducted in the prior 12 months.

(3) Prior to inspection, receives a list of all sterile drugs and nonsterile drugs compounded by the outsourcing facility as reported to the FDA in the last 12 months.

(e) An outsourcing facility licensed pursuant to this section shall provide the board with all of the following:

(1) A copy of any disciplinary or other action taken by another state or the FDA within 10 days of the action.

(2) Notice within 24 hours of any recall notice issued by the outsourcing facility.

(3) A copy of any clinically related complaint it receives involving an outsourcing facility's compounded products from or involving any provider, pharmacy, or patient in California within 72 hours of receipt.

(4) Notice within 24 hours after learning of adverse effects reported or potentially attributable to the outsourcing facility's products.

4129.2. (a) An outsourcing facility that is licensed with the federal Food and Drug Administration (FDA) as an outsourcing facility and has an address outside of this state but in the United States of America is a nonresident outsourcing facility. A nonresident outsourcing facility shall not compound sterile drug products or nonsterile drug products for distribution or use into this state without an outsourcing license issued by the board pursuant to this section. The license shall be renewed annually and shall not be transferable.

(b) A nonresident outsourcing facility shall compound all sterile products and nonsterile products to be distributed or used in this state in compliance with regulations of the board and with federal current good manufacturing practices applicable to outsourcing facilities.

(c) A license for a nonresident outsourcing facility shall not be issued or renewed until the location is inspected by the board and found in compliance with this article and any regulations adopted by the board. The nonresident outsourcing facility shall reimburse the board for all actual and necessary costs incurred by the board in conducting an inspection of the nonresident outsourcing facility at least once annually pursuant to subdivision (x) of Section 4400.

(d) A license for a nonresident outsourcing facility shall not be issued or renewed until the board:

(1) Prior to inspection, reviews a current copy of the nonresident outsourcing facility's policies and procedures for sterile compounding and nonsterile compounding.

(2) (A) Is provided with copies of all federal and state regulatory agency inspection reports, as well as accreditation reports, and certification reports of facilities or equipment of the nonresident outsourcing facility's premises conducted in the prior 12 months.

(B) For purposes of this paragraph, "state" refers to the state in which the nonresident outsourcing facility resides.

(3) Prior to inspection, receives a list of all sterile drug products and nonsterile drug products compounded by the pharmacy as reported to the FDA within the prior 12 months.

(e) A nonresident outsourcing facility licensed pursuant to this section shall provide the board with all of the following:

(1) A copy of any disciplinary or other action taken by another state or the FDA within 10 days of the action.

(2) Notice within 24 hours of any recall notice issued by the nonresident outsourcing facility.

(3) A copy of any complaint it receives involving an outsourcing facility's compounded products from or involving any provider, pharmacy, or patient in California within 72 hours of receipt.

(4) Notice within 24 hours after learning of adverse effects reported or potentially attributable to a nonresident outsourcing facility's products.

4129.3. (a) On or before January 1, 2018, the board shall provide a report to the Legislature regarding the regulation of nonresident outsourcing facilities. The report shall be submitted to the Legislature in the manner required pursuant to Section 9795 of the Government Code. At a minimum, the report shall address all of the following:

(1) A detailed description of board activities related to the inspection and licensure of nonresident outsourcing facilities.

(2) Whether fee revenue collected pursuant to subdivision (x) of Section 4400 and travel cost reimbursements collected pursuant to subdivision (c) of Section 4129.2 provide revenue in an amount sufficient to support the board's activities related to the inspection and licensure of nonresident outsourcing facilities.

(3) The status of proposed changes to federal law that are under serious consideration and that would govern outsourcing facilities and compounding pharmacies, including, but not limited to, legislation pending before Congress, administrative rules, regulations or orders under consideration by the FDA or other appropriate federal agency, and cases pending before the courts.

(4) If applicable, recommended modifications to the board's statutory duties related to nonresident outsourcing facilities as a result of changes to federal law or any additional modifications necessary to protect the health and safety of the public.

(b) The requirement for submitting a report imposed under subdivision (a) is inoperative on January 1, 2022, pursuant to Section 10231.5 of the Government Code.

4129.4. (a) Whenever the board has a reasonable belief, based on information obtained during an inspection or investigation by the board, that an outsourcing facility compounding sterile drug products or nonsterile drug products poses an immediate threat to the public health or safety, the executive officer of the board may issue an order to the outsourcing facility to immediately cease and desist compounding sterile drug products or nonsterile drug products. The cease and desist order shall remain in effect for no more than 30 days or the date of a hearing seeking an interim suspension order, whichever is earlier.

(b) Whenever the board issues a cease and desist order pursuant to subdivision (a), the board shall immediately issue a notice to the owner setting forth the acts or omissions with which the owner is charged, specifying the pertinent code section or sections and any regulations.

(c) The cease and desist order shall state that the owner, within 15 days of receipt of the notice, may request a hearing before the president of the board to contest the cease and desist order. Consideration of the owner's contest of the cease and desist order shall comply with the requirements of Section 11425.10 of the Government Code. The hearing shall be held no later than five days after the date the request of the owner is received by the board. The president shall render a written decision within five days after the hearing. In the absence of the president of the board, the vice president of the board may conduct the hearing permitted by this subdivision. Review of the decision may be sought by the owner or person in possession or control of the outsourcing facility pursuant to Section 1094.5 of the Code of Civil Procedure.

(d) Failure to comply with a cease and desist order issued pursuant to this section shall be unprofessional conduct.

4129.5. Notwithstanding any other law, a violation of this article, or regulation adopted pursuant thereto, may subject the person or entity that committed the violation to a fine of up to five thousand dollars (\$5,000) per occurrence pursuant to a citation issued by the board.

4129.8. The board, at its discretion, may issue a temporary license to an outsourcing facility upon the conditions and for any periods of time as the board determines to be in the public interest. A temporary license fee shall be required as specified in subdivision (w) of Section 4400. When needed to protect public safety, a temporary license may be issued for a period not to exceed 180 days, and may be issued subject to terms and conditions the board deems necessary. If the board determines a temporary license was issued by mistake or denies the application for a permanent license, the temporary license shall terminate upon the earlier of personal service of the notice of termination upon the licenseholder or service by certified mail with return receipt requested at the licenseholder's address of record with the board. The temporary licenseholder shall not be deemed to have a vested property right or interest in the license for purposes of retaining a temporary license or for purposes of any disciplinary or license denial proceeding before the board.

4129.9. (a) An outsourcing facility licensed pursuant to Section 4129.1 or 4129.2 that issues a recall notice for a sterile drug or nonsterile drug compounded by the outsourcing facility, in addition to any other duties, shall contact the recipient pharmacy, prescriber, or patient of the recalled drug and the board as soon as possible within 24 hours of the recall notice if both of the following apply:

(1) Use of or exposure to the recalled drug may cause serious adverse health consequences or death.

(2) The recalled drug was dispensed, or is intended for use, in this state.

(b) A recall notice issued pursuant to subdivision (a) shall be made as follows:

(1) If the recalled drug was dispensed directly to the prescriber, the notice shall be made to the prescriber and the prescriber shall ensure the patient is notified.

(2) If the recalled drug was dispensed directly to a pharmacy, the notice shall be made to the pharmacy and that pharmacy shall notify the prescriber or patient, as appropriate. If the pharmacy notifies the prescriber, the prescriber shall ensure the patient is notified.

SEC. 30. Section 4161 of the Business and Professions Code is amended to read:

4161. (a) A person located outside this state that (1) ships, sells, mails, warehouses, distributes, or delivers dangerous drugs or dangerous devices into this state or (2) sells, brokers, warehouses, or distributes dangerous drugs or devices within this state shall be considered a nonresident wholesaler or a nonresident third-party logistics provider.

(b) A nonresident wholesaler or nonresident third-party logistics provider shall be licensed by the board prior to shipping, selling, mailing, warehousing, distributing, or delivering dangerous drugs or dangerous devices to a site located in this state or selling, brokering, warehousing, or distributing dangerous drugs or devices within this state.

(c) (1) A separate license shall be required for each place of business owned or operated by a nonresident wholesaler or nonresident third-party logistics provider from or through which dangerous drugs or dangerous

devices are shipped, sold, mailed, warehoused, distributed, or delivered to a site located in this state or sold, brokered, warehoused, or distributed within this state. Each place of business may only be issued a single license by the board, except as provided in paragraph (2). A license shall be renewed annually and shall not be transferable.

(2) A nonresident wholesaler and a nonresident third-party logistics provider under common ownership may be licensed at the same place of business provided that all of the following requirements are satisfied:

(A) The wholesaler and the third-party logistics provider each separately maintain the records required under Section 4081.

(B) Dangerous drugs and dangerous devices owned by the wholesaler are not commingled with the dangerous drugs and dangerous devices handled by the third-party logistics provider.

(C) Any individual acting as a designated representative for the wholesaler is not concurrently acting as a designated representative-3PL on behalf of the third-party logistics provider. Nothing in this subparagraph shall be construed to prohibit an individual from concurrently holding a license to act as a designated representative and to act as a designated representative-3PL.

(D) The wholesaler has its own designated representative-in-charge responsible for the operations of the wholesaler and the third-party logistics provider has its own responsible manager responsible for the operations of the third-party logistics provider. The same individual shall not concurrently serve as the responsible manager and the designated representative-in-charge for a wholesaler and a third-party logistics provider licensed at the same place of business.

(E) The third-party logistics provider does not handle the prescription drugs or prescription devices owned by a prescriber.

(F) The third-party logistics provider is not a reverse third-party logistics provider.

(G) The wholesaler is not acting as a reverse distributor.

(d) The following information shall be reported, in writing, to the board at the time of initial application for licensure by a nonresident wholesaler or a nonresident third-party logistics provider, on renewal of a nonresident wholesaler or nonresident third-party logistics provider license, or within 30 days of a change in that information:

(1) Its agent for service of process in this state.

(2) Its principal corporate officers, as specified by the board, if any.

(3) Its general partners, as specified by the board, if any.

(4) Its owners if the applicant is not a corporation or partnership.

(e) A report containing the information in subdivision (d) shall be made within 30 days of any change of ownership, office, corporate officer, or partner.

(f) A nonresident wholesaler or nonresident third-party logistics provider shall comply with all directions and requests for information from the regulatory or licensing agency of the state in which it is licensed, as well as with all requests for information made by the board.

(g) A nonresident wholesaler or nonresident third-party logistics provider shall maintain records of dangerous drugs and dangerous devices sold, traded, transferred, warehoused, or distributed to persons in this state or within this state, so that the records are in a readily retrievable form.

(h) A nonresident wholesaler or nonresident third-party logistics provider shall at all times maintain a valid, unexpired license, permit, or registration to conduct the business of the wholesaler or nonresident third-party logistics provider in compliance with the laws of the state in which it is a resident. An application for a nonresident wholesaler or nonresident third-party logistics provider license in this state shall include a license verification from the licensing authority in the applicant's state of residence.

(i) (1) The board shall not issue or renew a nonresident wholesaler license until the nonresident wholesaler identifies a designated representative-in-charge and notifies the board in writing of the identity and license number of the designated representative-in-charge.

(2) The board shall not issue or renew a nonresident third-party logistics provider license until the nonresident third-party logistics provider identifies a responsible manager and notifies the board in writing of the identity and license number of the designated representative-3PL who will be the responsible manager.

(j) The designated representative-in-charge shall be responsible for the compliance of the nonresident wholesaler with state and federal laws governing wholesalers. The responsible manager shall be responsible for the compliance of the nonresident third-party logistics provider's place of business with state and federal laws governing third-party logistics providers. A nonresident wholesaler or nonresident third-party logistics provider shall identify and notify the board of a new designated representative-in-charge or responsible manager within 30 days of the date that the prior designated representative-in-charge or responsible manager ceases to be the designated representative-in-charge or responsible manager.

(k) The board may issue a temporary license, upon conditions and for periods of time as the board determines to be in the public interest. A temporary license fee shall be five hundred fifty dollars (\$550) or another amount established by the board not to exceed the annual fee for renewal of a license to compound ~~injectable~~ sterile drug products. When needed to protect public safety, a temporary license may be issued for a period not to exceed 180 days, subject to terms and conditions that the board deems necessary. If the board determines that a temporary license was issued by mistake or denies the application for a permanent license, the temporary license shall terminate upon either personal service of the notice of termination upon the licenseholder or service by certified mail, return receipt requested, at the licenseholder's address of record with the board, whichever occurs first. Neither for purposes of retaining a temporary license, nor for purposes of any disciplinary or license denial proceeding before the board, shall the temporary licenseholder be deemed to have a vested property right or interest in the license.

(l) The registration fee shall be the fee specified in subdivision (f) of Section 4400.

SEC. 31. Section 4180 of the Business and Professions Code is amended to read:

4180. (a) (1) Notwithstanding any provision of this chapter, any of the following clinics may purchase drugs at wholesale for administration or dispensing, under the direction of a physician and surgeon, to patients registered for care at the clinic:

(A) A licensed nonprofit community clinic or free clinic as defined in paragraph (1) of subdivision (a) of Section 1204 of the Health and Safety Code.

(B) A primary care clinic owned or operated by a county as referred to in subdivision (b) of Section 1206 of the Health and Safety Code.

(C) A clinic operated by a federally recognized Indian tribe or tribal organization as referred to in subdivision (c) of Section 1206 of the Health and Safety Code.

(D) A clinic operated by a primary care community or free clinic, operated on separate premises from a licensed clinic, and that is open no more than 20 hours per week as referred to in subdivision (h) of Section 1206 of the Health and Safety Code.

(E) A student health center clinic operated by a public institution of higher education as referred to in subdivision (j) of Section 1206 of the Health and Safety Code.

(F) A nonprofit multispecialty clinic as referred to in subdivision (l) of Section 1206 of the Health and Safety Code.

(2) The clinic shall keep records of the kind and amounts of drugs purchased, administered, and dispensed, and the records shall be available and maintained for a minimum of three years for inspection by all properly authorized personnel.

(b) No clinic shall be entitled to the benefits of this section until it has obtained a license from the board. A separate license shall be required for each clinic location. A clinic shall notify the board of any change in the clinic's address on a form furnished by the board.

(c) The board shall synchronize license renewal dates and aggregate fees for multiple clinics under common nonprofit ownership at the request of the parent organization.

SEC. 32. Section 4201 of the Business and Professions Code is amended to read:

4201. (a) Each application to conduct a pharmacy, wholesaler, third-party logistics provider, ~~or~~ veterinary food-animal drug ~~retailer~~ *retailer, or outsourcing facility* shall be made on a form furnished by the board and shall state the name, address, usual occupation, and professional qualifications, if any, of the applicant. If the applicant is other than a natural person, the application shall state the information as to each person beneficially interested ~~therein~~ *therein or any person with management or control over the license*.

(b) As used in this section, and subject to subdivision (c), the term "person beneficially interested" means and includes:

(1) If the applicant is a partnership or other unincorporated association, each partner or member.

(2) If the applicant is a corporation, each of its officers, directors, and stockholders, provided that a natural person shall not be deemed to be beneficially interested in a nonprofit corporation.

(3) If the applicant is a limited liability company, each officer, manager, or member.

(c) If the applicant is a partnership or other unincorporated association, a limited liability company, or a corporation, and the number of partners, members, or stockholders, as the case may be, exceeds five, the application shall so state, and shall further state the information required by subdivision (a) as to each of the five partners, members, or stockholders who own the five largest interests in the applicant entity. Upon request by the executive officer, the applicant shall furnish the board with the information required by subdivision (a) as to partners, members, or stockholders not named in the application, or shall refer the board to an appropriate source of that information.

(d) The application shall contain a statement to the effect that the applicant has not been convicted of a felony and has not violated any of the provisions of this chapter. If the applicant cannot make this statement, the application shall contain a statement of the violation, if any, or reasons which will prevent the applicant from being able to comply with the requirements with respect to the statement.

(e) Upon the approval of the application by the board and payment of the fee required by this chapter for each pharmacy, wholesaler, third-party logistics provider, or veterinary food-animal drug retailer, the executive officer of the board shall issue a license to conduct a pharmacy, wholesaler, third-party logistics provider, ~~or~~ veterinary food-animal drug ~~retailer~~ *retailer, or outsourcing facility* if all of the provisions of this chapter have been complied with.

(f) Notwithstanding any other law, the pharmacy license shall authorize the holder to conduct a pharmacy. The license shall be renewed annually and shall not be transferable.

(g) Notwithstanding any other law, the wholesaler license shall authorize the holder to wholesale dangerous drugs and dangerous devices. The license shall be renewed annually and shall not be transferable.

(h) Notwithstanding any other law, the third-party logistics provider license shall authorize the holder to provide or coordinate warehousing, distribution, or other similar services of dangerous drugs and dangerous devices. The license shall be renewed annually and shall not be transferable.

(i) Notwithstanding any other law, the veterinary food-animal drug retailer license shall authorize the holder to conduct a veterinary food-animal drug retailer and to sell and dispense veterinary food-animal drugs as defined in Section 4042.

(j) For licenses referred to in subdivisions (f), (g), (h), and (i), any change in the proposed beneficial ownership interest shall be reported to the board within 30 days thereafter upon a form to be furnished by the board.

SEC. 33. *Section 4203.5 is added to the Business and Professions Code, to read:*

4203.5. (a) Notwithstanding any other law, when a clinic applicant submits either type of application described in subdivision (b), the board shall issue a license or incorporate the reported changes, as appropriate, within 30 days of receipt of a completed application and payment of any prescribed fees.

(b) This section applies to the following types of applications:

(1) A new clinic license application filed under Section 4180.

(2) Applications to report changes to an existing site licensed under Section 4180, including, but not limited to, changes in professional director, clinic administrator, corporate officers, change of location, or change of address.

(c) This section shall not be construed to limit the board's authority to conduct an investigation to determine whether applicants and the premises for which an application is made qualify for a license.

SEC. 34. Section 4301 of the Business and Professions Code is amended to read:

4301. The board shall take action against any holder of a license who is guilty of unprofessional conduct or whose license has been ~~procured by fraud or misrepresentation or~~ issued by mistake. Unprofessional conduct shall include, but is not limited to, any of the following:

(a) ~~Gross immorality.~~ *Procurement of a license by fraud or misrepresentation.*

(b) Incompetence.

(c) Gross negligence.

(d) The clearly excessive furnishing of controlled substances in violation of subdivision (a) of Section 11153 of the Health and Safety Code.

(e) The clearly excessive furnishing of controlled substances in violation of subdivision (a) of Section 11153.5 of the Health and Safety Code. Factors to be considered in determining whether the furnishing of controlled substances is clearly excessive shall include, but not be limited to, the amount of controlled substances furnished, the previous ordering pattern of the customer (including size and frequency of orders), the type and size of the customer, and where and to whom the customer distributes its product.

(f) The commission of any act involving moral turpitude, dishonesty, fraud, deceit, or corruption, whether the act is committed in the course of relations as a licensee or otherwise, and whether the act is a felony or misdemeanor or not.

(g) Knowingly making or signing any certificate or other document that falsely represents the existence or nonexistence of a state of facts.

(h) The administering to oneself, of any controlled substance, or the use of any dangerous drug or of alcoholic beverages to the extent or in a manner as to be dangerous or injurious to oneself, to a person holding a license under this chapter, or to any other person or to the public, or to the extent that the use impairs the ability of the person to conduct with safety to the public the practice authorized by the license.

(i) Except as otherwise authorized by law, knowingly selling, furnishing, giving away, or administering, or offering to sell, furnish, give away, or administer, any controlled substance to an addict.

(j) The violation of any of the statutes of this state, of any other state, or of the United States regulating controlled substances and dangerous drugs.

(k) The conviction of more than one misdemeanor or any felony involving the use, consumption, or self-administration of any dangerous drug or alcoholic beverage, or any combination of those substances.

(l) The conviction of a crime substantially related to the qualifications, functions, and duties of a licensee under this chapter. The record of conviction of a violation of Chapter 13 (commencing with Section 801) of Title 21 of the United States Code regulating controlled substances or of a violation of the statutes of this state regulating controlled substances or dangerous drugs shall be conclusive evidence of unprofessional conduct. In all other cases, the record of conviction shall be conclusive evidence only of the fact that the conviction occurred. The board may inquire into the circumstances surrounding the commission of the crime, in order to fix the degree of discipline or, in the case of a conviction not involving controlled substances or dangerous drugs, to determine if the conviction is of an offense substantially related to the qualifications, functions, and duties of a licensee under this chapter. A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this provision. The board may take action when the time for appeal has elapsed,

or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under Section 1203.4 of the Penal Code allowing the person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information, or indictment.

(m) The cash compromise of a charge of violation of Chapter 13 (commencing with Section 801) of Title 21 of the United States Code regulating controlled substances or of Chapter 7 (commencing with Section 14000) of Part 3 of Division 9 of the Welfare and Institutions Code relating to the Medi-Cal program. ~~The record of the compromise is conclusive evidence of unprofessional conduct.~~

(n) The revocation, suspension, or other discipline by another state of a license to practice pharmacy, operate a pharmacy, or do any other act for which a license is required by this ~~chapter.~~ *chapter that would be grounds for revocation, suspension, or other discipline under this chapter. Any disciplinary action taken by the board pursuant to this section shall be coterminous with action taken by another state, except that the term of any discipline taken by the board may exceed that of another state, consistent with the board's enforcement guidelines. The evidence of discipline by another state is conclusive proof of unprofessional conduct.*

(o) Violating or attempting to violate, directly or indirectly, or assisting in or abetting the violation of or conspiring to violate any provision or term of this chapter or of the applicable federal and state laws and regulations governing pharmacy, including regulations established by the board or by any other state or federal regulatory agency.

(p) Actions or conduct that would have warranted denial of a license.

(q) Engaging in any conduct that subverts or attempts to subvert an investigation of the board.

(r) The selling, trading, transferring, or furnishing of drugs obtained pursuant to Section 256b of Title 42 of the United States Code to any person a licensee knows or reasonably should have known, not to be a patient of a covered entity, as defined in paragraph (4) of subsection (a) of Section 256b of Title 42 of the United States Code.

(s) The clearly excessive furnishing of dangerous drugs by a wholesaler to a pharmacy that primarily or solely dispenses prescription drugs to patients of long-term care facilities. Factors to be considered in determining whether the furnishing of dangerous drugs is clearly excessive shall include, but not be limited to, the amount of dangerous drugs furnished to a pharmacy that primarily or solely dispenses prescription drugs to patients of long-term care facilities, the previous ordering pattern of the pharmacy, and the general patient population to whom the pharmacy distributes the dangerous drugs. That a wholesaler has established, and employs, a tracking system that complies with the requirements of subdivision (b) of Section 4164 shall be considered in determining whether there has been a violation of this subdivision. This provision shall not be interpreted to require a wholesaler to obtain personal medical information or be authorized to permit a wholesaler to have access to personal medical information except as otherwise authorized by Section 56 and following of the Civil Code. For purposes of this section, "long-term care facility" shall have the same meaning given the term in Section 1418 of the Health and Safety Code.

SEC. 35. *Section 4301.1 is added to the Business and Professions Code, to read:*

4301.1. In order to ensure that the board's resources are maximized for the protection of the public health and safety, the board shall prioritize its investigative and prosecutorial resources to ensure that pharmacists representing the greatest threat of patient harm are identified and disciplined expeditiously.

SEC. 36. Section 4302 of the Business and Professions Code is amended to read:

4302. The board may deny, suspend, or revoke any license ~~of a corporation~~ where conditions exist in relation to any person holding 10 percent or more of the ~~corporate stock of the corporation,~~ *ownership interest* or where conditions exist in relation to any ~~officer or director of the corporation~~ *officer, director, or other person with management or control of the license* that would constitute grounds for disciplinary action against a licensee.

SEC. 37. *Section 4303.1 is added to the Business and Professions Code, to read:*

4303.1. If the federal Food and Drug Administration (FDA) cancels, revokes, or suspends an outsourcing facility's registration for any reason, any license issued pursuant to Section 4129.2 shall be immediately canceled, revoked, or suspended by operation of law.

SEC. 38. Section 4307 of the Business and Professions Code is amended to read:

4307. (a) Any person who has been denied a license or whose license has been revoked or is under suspension, or who has failed to renew his or her license while it was under suspension, or who has been a manager, administrator, owner, member, officer, director, associate, ~~or partner~~ *partner, or any other person with management or control* of any partnership, corporation, *trust*, firm, or association whose application for a license has been denied or revoked, is under suspension or has been placed on probation, and while acting as the manager, administrator, owner, member, officer, director, associate, ~~or partner~~ *partner, or any other person with management or control* had knowledge of or knowingly participated in any conduct for which the license was denied, revoked, suspended, or placed on probation, shall be prohibited from serving as a manager, administrator, owner, member, officer, director, associate, ~~or partner~~ *partner, or in any other position with management or control* of a licensee as follows:

(1) Where a probationary license is issued or where an existing license is placed on probation, this prohibition shall remain in effect for a period not to exceed five years.

(2) Where the license is denied or revoked, the prohibition shall continue until the license is issued or reinstated.

(b) "Manager, administrator, owner, member, officer, director, associate, ~~or partner~~," *partner, or any other person with management or control of a license*" as used in this section and Section 4308, may refer to a pharmacist or to any other person who serves in ~~that such~~ capacity in or for a licensee.

(c) The provisions of subdivision (a) may be alleged in any pleading filed pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of the Government Code. However, no order may be issued in that case except as to a person who is named in the caption, as to whom the pleading alleges the applicability of this section, and where the person has been given notice of the proceeding as required by Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of the Government Code. The authority to proceed as provided by this subdivision shall be in addition to the board's authority to proceed under Section 4339 or any other provision of law.

SEC. 39. Section 4308 of the Business and Professions Code is amended to read:

4308. Whenever a person is prohibited from serving as a manager, administrator, owner, member, officer, director, associate, ~~or partner~~ *partner, or in any other position with management or control* of a licensee as provided by Section 4307, the board shall, in each case where it has that information, notify in writing each licensee for whom the person is a manager, administrator, owner, member, officer, director, associate, ~~or partner~~ *partner, or in any other position with management or control* of the prohibition. The board shall send the notification to the licensee's address of record. The licensee shall have 30 days from the date that the notice is sent to remove and replace the prohibited person and, where appropriate, file a change of permit to reflect that change.

SEC. 40. Section 4312 of the Business and Professions Code is amended to read:

4312. (a) The board may cancel the license of a wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer~~ *retailer, or outsourcing facility* if the licensed premises remain closed, as defined in subdivision (e), other than by order of the board. For good cause shown, the board may cancel a license after a shorter period of closure. To cancel a license pursuant to this subdivision, the board shall make a diligent, good faith effort to give notice by personal service on the licensee. If a written objection is not received within 10 days after personal service is made or a diligent, good faith effort to give notice by personal service on the licensee has failed, the board may cancel the license without the necessity of a hearing. If the licensee files a written objection, the board shall file an accusation based on the licensee remaining closed. Proceedings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the board shall have all the powers granted in that chapter.

(b) If the license of a wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer~~ *retailer, or outsourcing facility* is canceled pursuant to subdivision (a) or revoked pursuant to Article 19 (commencing with Section 4300), or a wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer~~ *retailer, or outsourcing facility* notifies the board of its intent to remain closed or to discontinue business, the licensee shall, within 10 days thereafter, arrange for the transfer of all dangerous drugs and controlled substances or dangerous devices to another licensee authorized to possess the dangerous drugs and controlled substances or dangerous devices. The licensee transferring the dangerous drugs and controlled

substances or dangerous devices shall immediately confirm in writing to the board that the transfer has taken place.

(c) If a wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer-~~ *retailer, or outsourcing facility* fails to comply with subdivision (b), the board may seek and obtain an order from the superior court in the county in which the wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer-~~ *retailer, or outsourcing facility* is located, authorizing the board to enter the wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer-~~ *retailer, or outsourcing facility* and inventory and store, transfer, sell, or arrange for the sale of, all dangerous drugs and controlled substances and dangerous devices found in the wholesaler, third-party logistics provider, pharmacy, ~~or~~ veterinary food-animal drug ~~retailer-~~ *retailer, or outsourcing facility*.

(d) If the board sells or arranges for the sale of any dangerous drugs, controlled substances, or dangerous devices pursuant to subdivision (c), the board may retain from the proceeds of the sale an amount equal to the cost to the board of obtaining and enforcing an order issued pursuant to subdivision (c), including the cost of disposing of the dangerous drugs, controlled substances, or dangerous devices. The remaining proceeds, if any, shall be returned to the licensee from whose premises the dangerous drugs or controlled substances or dangerous devices were removed.

(1) The licensee shall be notified of his or her right to the remaining proceeds by personal service or by certified mail, postage prepaid.

(2) If a statute or regulation requires the licensee to file with the board his or her address, and any change of address, the notice required by this subdivision may be sent by certified mail, postage prepaid, to the latest address on file with the board and service of notice in this manner shall be deemed completed on the 10th day after the mailing.

(3) If the licensee is notified as provided in this subdivision, and the licensee fails to contact the board for the remaining proceeds within 30 calendar days after personal service has been made or service by certified mail, postage prepaid, is deemed completed, the remaining proceeds shall be deposited by the board into the Pharmacy Board Contingent Fund. These deposits shall be deemed to have been received pursuant to Chapter 7 (commencing with Section 1500) of Title 10 of Part 3 of the Code of Civil Procedure and shall be subject to claim or other disposition as provided in that chapter.

(e) For the purposes of this section, "closed" means not engaged in the ordinary activity for which a license has been issued for at least one day each calendar week during any 120-day period.

(f) Nothing in this section shall be construed as requiring a pharmacy to be open seven days a week.

SEC. 41. *Section 4316 is added to the Business and Professions Code, to read:*

4316. (a) The board is authorized to issue a cease and desist order for operating any facility under this chapter that requires licensure or for practicing any activity under this chapter that requires licensure.

(b) Whenever the board issues a cease and desist order pursuant to subdivision (a), the board shall immediately issue the facility a notice setting forth the acts or omissions with which it is charged, specifying the pertinent code section or sections and any regulations.

(c) The order shall provide that the facility, within 15 days of receipt of the notice, may request a hearing before the president of the board to contest the cease and desist order. Consideration of the facility's contest of the cease and desist order shall comply with the requirements of Section 11425.10 of the Government Code. The hearing shall be held no later than five days from the date the request of the owner is received by the board. The president shall render a written decision within five days of the hearing. In the absence of the president of the board, the vice president of the board may conduct the hearing permitted by this subdivision. Review of the decision of the president of the board may be sought by the owner or person in possession or control of the pharmacy pursuant to Section 1094.5 of the Code of Civil Procedure.

SEC. 42. Section 4400 of the Business and Professions Code is amended to read:

4400. The amount of fees and penalties prescribed by this chapter, except as otherwise provided, is that fixed by the board according to the following schedule:

(a) The fee for a nongovernmental pharmacy license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520). The fee for the issuance of a temporary nongovernmental pharmacy permit shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(b) The fee for a nongovernmental pharmacy license annual renewal shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(c) The fee for the pharmacist application and examination shall be two hundred dollars (\$200) and may be increased to two hundred sixty dollars (\$260).

(d) The fee for regrading an examination shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). If an error in grading is found and the applicant passes the examination, the regrading fee shall be refunded.

(e) The fee for a pharmacist license and biennial renewal shall be one hundred fifty dollars (\$150) and may be increased to one hundred ninety-five dollars (\$195).

(f) The fee for a nongovernmental wholesaler or third-party logistics provider license and annual renewal shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(g) The fee for a hypodermic license and renewal shall be one hundred twenty-five dollars (\$125) and may be increased to one hundred sixty-five dollars (\$165).

(h) (1) The fee for application, investigation, and issuance of a license as a designated representative pursuant to Section 4053, or as a designated representative-3PL pursuant to Section 4053.1, shall be three hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative or designated representative-3PL shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(i) (1) The fee for the application, investigation, and issuance of a license as a designated representative for a veterinary food-animal drug retailer pursuant to Section 4053 shall be three hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative for a veterinary food-animal drug retailer shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(j) (1) The application fee for a nonresident wholesaler or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(2) For nonresident wholesalers or third-party logistics providers that have 21 or more facilities operating nationwide the application fees for the first 20 locations shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(3) The annual renewal fee for a nonresident wholesaler license or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(k) The fee for evaluation of continuing education courses for accreditation shall be set by the board at an amount not to exceed forty dollars (\$40) per course hour.

(l) The fee for an intern pharmacist license shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). The fee for transfer of intern hours or verification of licensure to another state shall be twenty-five dollars (\$25) and may be increased to thirty dollars (\$30).

(m) The board may waive or refund the additional fee for the issuance of a license where the license is issued less than 45 days before the next regular renewal date.

(n) The fee for the reissuance of any license, or renewal thereof, that has been lost or destroyed or reissued due to a name change shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(o) The fee for the reissuance of any license, or renewal thereof, that must be reissued because of a change in the information, shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(p) It is the intent of the Legislature that, in setting fees pursuant to this section, the board shall seek to maintain a reserve in the Pharmacy Board Contingent Fund equal to approximately one year's operating expenditures.

(q) The fee for any applicant for a nongovernmental clinic license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520) for each license. The annual fee for renewal of the license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325) for each license.

(r) The fee for the issuance of a pharmacy technician license shall be eighty dollars (\$80) and may be increased to one hundred five dollars (\$105). The fee for renewal of a pharmacy technician license shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(s) The fee for a veterinary food-animal drug retailer license shall be four hundred five dollars (\$405) and may be increased to four hundred twenty-five dollars (\$425). The annual renewal fee for a veterinary food-animal drug retailer license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(t) The fee for issuance of a retired license pursuant to Section 4200.5 shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(u) The fee for issuance or renewal of a nongovernmental sterile compounding pharmacy license shall be six hundred dollars (\$600) and may be increased to seven hundred eighty dollars (\$780). The fee for a temporary license shall be five hundred fifty dollars (\$550) and may be increased to seven hundred fifteen dollars (\$715).

(v) The fee for the issuance or renewal of a nonresident sterile compounding pharmacy license shall be seven hundred eighty dollars (\$780). In addition to paying that application fee, the nonresident sterile compounding pharmacy shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4127.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

(w) ~~This section shall become operative on July 1, 2014.~~ *The fee for the issuance of an outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. The fee for the renewal of an outsourcing facility license shall be one thousand three hundred twenty-five dollars (\$1,325) and may be increased to up to one thousand eight hundred fifty-five dollars (\$1,855) by the board. The fee for a temporary outsourcing facility license shall be seven hundred fifteen dollars (\$715).*

(x) The fee for the issuance of a nonresident outsourcing facility license shall be two thousand three hundred eighty dollars (\$2,380) and may be increased to up to three thousand three hundred thirty-five dollars (\$3,335) by the board. The fee for the renewal of a nonresident outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. In addition to paying that application fee, the nonresident outsourcing facility shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4129.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the

amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

SEC. 42.5. Section 4400 of the Business and Professions Code is amended to read:

4400. The amount of fees and penalties prescribed by this chapter, except as otherwise provided, is that fixed by the board according to the following schedule:

(a) The fee for a nongovernmental pharmacy license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520). The fee for the issuance of a temporary nongovernmental pharmacy permit shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(b) The fee for a nongovernmental pharmacy license annual renewal shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(c) The fee for the pharmacist application and examination shall be two hundred dollars (\$200) and may be increased to two hundred sixty dollars (\$260).

(d) The fee for regrading an examination shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). If an error in grading is found and the applicant passes the examination, the regrading fee shall be refunded.

(e) The fee for a pharmacist license and biennial renewal shall be one hundred fifty dollars (\$150) and may be increased to one hundred ninety-five dollars (\$195).

(f) The fee for a nongovernmental wholesaler or third-party logistics provider license and annual renewal shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(g) The fee for a hypodermic license and renewal shall be one hundred twenty-five dollars (\$125) and may be increased to one hundred sixty-five dollars (\$165).

(h) (1) The fee for application, investigation, and issuance of a license as a designated representative pursuant to Section 4053, or as a designated representative-3PL pursuant to Section 4053.1, shall be three hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative or designated representative-3PL shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(i) (1) The fee for the application, investigation, and issuance of a license as a designated representative for a veterinary food-animal drug retailer pursuant to Section 4053 shall be three hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative for a veterinary food-animal drug retailer shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(j) (1) The application fee for a nonresident wholesaler or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(2) For nonresident wholesalers or third-party logistics providers that have 21 or more facilities operating nationwide the application fees for the first 20 locations shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(3) The annual renewal fee for a nonresident wholesaler license or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(k) The fee for evaluation of continuing education courses for accreditation shall be set by the board at an amount not to exceed forty dollars (\$40) per course hour.

(l) The fee for an intern pharmacist license shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). The fee for transfer of intern hours or verification of licensure to another state shall be twenty-five dollars (\$25) and may be increased to thirty dollars (\$30).

(m) The board may waive or refund the additional fee for the issuance of a license where the license is issued less than 45 days before the next regular renewal date.

(n) The fee for the reissuance of any license, or renewal thereof, that has been lost or destroyed or reissued due to a name change shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(o) The fee for the reissuance of any license, or renewal thereof, that must be reissued because of a change in the information, shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(p) It is the intent of the Legislature that, in setting fees pursuant to this section, the board shall seek to maintain a reserve in the Pharmacy Board Contingent Fund equal to approximately one year's operating expenditures.

(q) The fee for any applicant for a nongovernmental clinic license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520) for each license. The annual fee for renewal of the license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325) for each license.

(r) The fee for the issuance of a pharmacy technician license shall be eighty dollars (\$80) and may be increased to one hundred five dollars (\$105). The fee for renewal of a pharmacy technician license shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(s) The fee for a veterinary food-animal drug retailer license shall be four hundred five dollars (\$405) and may be increased to four hundred twenty-five dollars (\$425). The annual renewal fee for a veterinary food-animal drug retailer license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(t) The fee for issuance of a retired license pursuant to Section 4200.5 shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(u) The fee for issuance or renewal of a nongovernmental sterile compounding pharmacy license shall be six hundred dollars (\$600) and may be increased to seven hundred eighty dollars (\$780). The fee for a temporary license shall be five hundred fifty dollars (\$550) and may be increased to seven hundred fifteen dollars (\$715).

(v) The fee for the issuance or renewal of a nonresident sterile compounding pharmacy license shall be seven hundred eighty dollars (\$780). In addition to paying that application fee, the nonresident sterile compounding pharmacy shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4127.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

(w) The fee for the issuance of an outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. The fee for the renewal of an outsourcing facility license shall be one thousand three hundred twenty-five dollars (\$1,325) and may be increased to up to one thousand eight hundred fifty-five dollars (\$1,855) by the board. The fee for a temporary outsourcing facility license shall be seven hundred fifteen dollars (\$715).

(x) The fee for the issuance of a nonresident outsourcing facility license shall be two thousand three hundred eighty dollars (\$2,380) and may be increased to up to three thousand three hundred thirty-five dollars (\$3,335) by

the board. The fee for the renewal of a nonresident outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. In addition to paying that application fee, the nonresident outsourcing facility shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4129.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

~~(w)~~ (y) This section shall become ~~operative~~ *inoperative* on July 1, ~~2014, 2017, and as of January 1, 2018, is repealed.~~

SEC. 43. Section 4406 of the Business and Professions Code is amended to read:

4406. All fees collected on behalf of the board and all receipts of every kind and nature shall be reported each month for the month preceding to the ~~State~~ Controller and at the same time the entire amount shall be paid into the State Treasury and shall be credited to the Pharmacy Board Contingent Fund which is hereby created. This contingent fund shall be ~~for the use of the board and out of it and not otherwise shall be paid all expenses of the available, upon appropriation of the Legislature, for the use of the~~ board.

SEC. 44. Section 4800 of the Business and Professions Code is amended to read:

4800. (a) There is in the Department of Consumer Affairs a Veterinary Medical Board in which the administration of this chapter is vested. The board consists of the following members:

(1) Four licensed veterinarians.

(2) One registered veterinary technician.

(3) Three public members.

(b) This section shall remain in effect only until January 1, ~~2017, 2021,~~ and as of that date is ~~repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.~~ *repealed.*

(c) Notwithstanding any other law, the repeal of this section renders the board subject to review by the appropriate policy committees of the Legislature. However, the review of the board shall be limited to those issues identified by the appropriate policy committees of the Legislature and shall not involve the preparation or submission of a sunset review document or evaluative questionnaire.

SEC. 45. Section 4804.5 of the Business and Professions Code is amended to read:

4804.5. The board may appoint a person exempt from civil service who shall be designated as an executive officer and who shall exercise the powers and perform the duties delegated by the board and vested in him or her by this chapter.

This section shall remain in effect only until January 1, ~~2017, 2021,~~ and as of that date is ~~repealed, unless a later enacted statute, that is enacted before January 1, 2017, deletes or extends that date.~~ *repealed.*

SEC. 46. *Section 4826.5 is added to the Business and Professions Code, to read:*

4826.5. Notwithstanding any other law, a licensed veterinarian or a registered veterinary technician under the supervision of a licensed veterinarian may compound drugs for animal use pursuant to Section 530 of Title 21 of the Code of Federal Regulations and in accordance with regulations promulgated by the board. The regulations promulgated by the board shall, at a minimum, address the storage of drugs, the level and type of supervision required for compounding drugs by a registered veterinary technician, and the equipment necessary for the safe compounding of drugs. Any violation of the regulations adopted by the board pursuant to this section shall constitute grounds for an enforcement or disciplinary action.

SEC. 47. Section 4830 of the Business and Professions Code is amended to read:

Attachment 2

PROPOSED LANGUAGE

To Amend Article 2 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

§1709. ~~Names of Owners and Pharmacist In Charge~~ Disclosure and Notification Requirements

(a) Each ~~permit~~ license issued by the board to operate a pharmacy shall ~~reflect show~~ the name and address of the pharmacy, the form of ownership (~~individual, partnership or corporation~~) and the pharmacist-in-charge. Each pharmacy shall, in its initial application and on the annual renewal form, report the name of the pharmacist-in-charge, the names of all owners and the names of the corporate officers (if a corporation). Any changes in the pharmacist-in-charge, or the owners, or corporate officers shall be reported to the ~~B~~board within 30 days.

(b) Any transfer, in a single transaction or in a series of transactions, of 10 percent or more of the beneficial interest in a business entity licensed by the board to a person or entity who did not hold a beneficial interest at the time the original ~~permit~~ license was issued, shall require written notification to the board within 30 days.

(c) A license issued by the board shall not be transferred from one owner to another. The following shall constitute a transfer of ~~permit~~ license and require application for a change of ownership: any transfer of a of the beneficial interest in a business entity licensed by the board, in a single transaction or in a series of transactions, to any person or entity, which transfer results in the transferee's holding 50% or more of the beneficial interest in that license. A change of ownership application shall be filed with the board in advance of the proposed transaction taking place.

(d) The board may issue, or renew, a license to an entity that is controlled by a revocable or irrevocable trust that meets the requirements of this subsection.

(1) In addition to the requirements in (a), as part of its application and during its annual renewal, the entity shall also report the name of any other person in any position with management or control of the pharmacy.

(2) An applicant shall disclose the full name of the trust, and shall provide to the board a complete copy of, and any amendments to the trust document. A trust document and any related amendments shall be considered confidential financial documents by the board.

(3) An applicant shall disclose as part of its application and during its annual renewal the name, address and contact information for each grantor, settlor, trustee, trust protector, as applicable. In addition, the applicant shall disclose the name, address and contact information for each beneficiary named in the trust that is age 18 or greater.

(4) The licensee, or any person with management or control of the pharmacy, shall notify the board in writing within 30 days of all the following:

A. A change in the trustee, protector or any other person with management or control of the pharmacy.

B. Any change in the beneficiaries of the trust, where the beneficiary is age 18 or older.

C. The revocation of the trust.

D. The dissolution of the trust.

E. Any amendment(s) to the trust since the original application.

(e) An applicant or licensee may be denied, suspended or revoked based on the failure of any individual required to be disclosed to the board to qualify pursuant to the provisions of sections 4302, 4307 and 4308 of the Business and Professions Code.

Note: Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4058, 4110, 4111, 4112, 4113, 4120, ~~4124~~, ~~4130~~, ~~4133~~, ~~4141~~, ~~4149~~, ~~4160~~, ~~4161~~, ~~4196~~, 4201, 4302, 4304, 4305, 4307, 4308, and 4330, Business and Professions Code.

Attachment 3

Section 4013 of the Business and Professions Code is amended to read:

(a) Any facility licensed by the board shall join the board's email notification list within 60 days of obtaining a license or at the time of license renewal.

(b) Any facility licensed by the board shall update its email address with the board's email notification list within 30 days of a change in the facility's email address.

(c) An owner of two or more facilities licensed by the board may comply with subdivisions (a) and (b) by subscribing a single email address to the board's email notification list, where the owner maintains an electronic notice system within all of its licensed facilities that, upon receipt of an email notification from the board, immediately transmits electronic notice of the same notification to all of its licensed facilities. If an owner chooses to comply with this section by using such an electronic notice system, the owner shall register the electronic notice system with the board by July 1, 2011, or within 60 days of initial licensure, whichever is later, informing the board of the single email address to be utilized by the owner, describing the electronic notice system, and listing all facilities to which immediate notice will be provided. The owner shall update its email address with the board's email notification list within 30 days of any change in the owner's email address.

(d) (1) Each pharmacist, intern pharmacist, pharmacy technician, designated representative, designated representative-3PL licensed in this state shall join the board's email notification list within 60 days of obtaining a license or at the time of license renewal.

(2) Each pharmacist, intern pharmacist, pharmacy technician, designated representative, and designated representative-3PL licensed in this state shall update his or her email address with the board's email notification list within 30 days of a change in the licensee's email address.

(3) The email address provided by a licensee shall not be posted on the board's online license verification system.

(4) The board shall, with each renewal application, remind licensees of their obligation to report and keep current their email address with the board's email notification list.

(5) This subdivision shall become operative on July 1, 2017.

Attachment 4

Title 16. Board of Pharmacy

Proposal to Amend California Code of Regulations Section 1749 Fee Schedule

Section 1749 Fee Schedule

The fees for the issuance and renewal of licenses, certificates, and permits, and the penalties to be assessed for failure to renew in accordance with sections 163.5, ~~4110, 4127.5, 4128.2, 4196, and 4400~~ of the Business and Professions Code and Pharmacy Law are hereby fixed as follows:

(a) The fee for the issuance of ~~a~~ any pharmacy license is five hundred twenty dollars (\$520). The fee for the annual renewal of pharmacy license is ~~three hundred twenty-five dollars (\$325)~~ six hundred sixty five dollars (\$665). The penalty for failure to renew is one hundred fifty dollars (\$150).

(b) The fee for the issuance of a temporary license is three hundred twenty-five dollars (\$325).

(c) The fee for the issuance of a pharmacy technician license shall be ~~one hundred five dollars (\$105)~~ one hundred and forty dollars (\$140). The fee for the biennial renewal of a pharmacy technician license shall be ~~one hundred thirty dollars (\$130)~~ one hundred forty dollars (\$140). The penalty for failure to renew a pharmacy technician license is ~~sixty-five dollars (\$65)~~ seventy dollars (\$70).

(d) The fee for application and examination as a pharmacist is two hundred sixty dollars (\$260).

(e) The fee for regrading an examination is one hundred fifteen dollars (\$115).

(f)(1) The fee for the issuance of an original pharmacist license is one hundred ninety-five dollars (\$195).

(2) The fee for application of an advanced practice pharmacist license is three hundred dollars (\$300). If granted, there is no fee for the initial license issued, which will expire at the same time the pharmacist's license expires.

(g) (1) The fee for the biennial renewal of a pharmacist's license is ~~one hundred ninety-five dollars (\$195)~~ three hundred sixty dollars (\$360). The penalty fee for failure to renew is ~~ninety-seven dollars fifty cents (\$97.50)~~ one hundred fifty dollars (\$150).

(2) The fee for the biennial renewal of an advanced practice pharmacist license is three hundred dollars (\$300). The penalty fee for failure to renew is one hundred fifty dollars (\$150). The fees in this paragraph are in addition to the fees required to renew the pharmacist's license as specified in paragraph 1.

(h) (1) The fee for the issuance or renewal of a wholesaler's license or third-party logistics provider is seven hundred eighty dollars (\$780). The penalty for failure to renew is one hundred fifty dollars (\$150).

(2) The fee for the issuance of a temporary license is seven hundred fifteen dollars (\$715).

(i) The fee for the issuance ~~or renewal~~ of a hypodermic license is ~~one hundred sixty-five dollars (\$165)~~ one hundred seventy dollars (\$170). The fee for the annual renewal of a hypodermic needle license is two hundred dollars (\$200). The penalty for failure to renew is ~~eighty-two dollars fifty cents (\$82.50)~~ one hundred dollars (\$100).

(j) The fee for the issuance of a license as a designated representative pursuant to Section 4053 of the Business and Professions Code or designated representative-3PL pursuant to Section

~~4053.1 shall be three hundred thirty dollars (\$330)~~ is one hundred fifty dollars (\$150). The fee for the annual renewal of a license as such a designated representative shall be ~~one hundred ninety-five dollars (\$195)~~ two hundred and fifteen dollars (\$215). The penalty for failure to renew is ~~ninety-seven dollars and fifty cents (\$97.50)~~ one hundred seven dollars and fifty cents (\$107.50).

(k) The fee for the ~~issuance~~ application or renewal of a license as a nonresident wholesaler or nonresident third-party logistics provider is seven hundred eighty dollars (\$780). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is seven hundred fifteen dollars (\$715).

(l) The fee for an intern pharmacist license is ~~one hundred fifteen dollars (\$115)~~ one hundred sixty-five dollars (\$165). The fee for transfer of intern hours or verification of licensure to another state is thirty dollars (\$30).

(m) The fee for the reissuance of any permit, license, or certificate, or renewal thereof, which must be reissued because of change in the information, other than name change, is one hundred dollars (\$100).

(n) The fee for the reissuance of any license that has been lost or destroyed or reissued due to a name change is forty-five dollars (\$45)

~~(n)~~ (o) The fee for evaluation of continuing education courses for accreditation is forty dollars (\$40) for each hour of accreditation requested.

~~(o)~~ (p) The fee for the issuance of a clinic license is five hundred twenty dollars (\$520). The fee for the annual renewal of a clinic license is three hundred twenty-five dollars (\$325). The penalty for failure to renew is one hundred fifty dollars (\$150).

~~(p)~~ (q) The fee for the issuance of a nongovernmental license, ~~or renewal of a license~~, to compound sterile drug products is ~~seven hundred eighty dollars (\$780)~~ one thousand six hundred forty-five dollars (\$1,645). The fee for the annual renewal of a nongovernmental license to compound sterile drug products is one thousand three hundred twenty-five dollars (\$1,325). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is five hundred dollars (\$550).

(r) The fee for the issuance of a nonresident sterile compounding pharmacy is two thousand three hundred eighty dollars (\$2,380). The fee for the annual renewal of nonresident sterile compounding pharmacy license is two thousand two hundred seventy dollars (\$2,270). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is five hundred dollars (\$550).

~~(q)~~ (s) The fee for the issuance of a license as a designated representative for a veterinary food-animal drug retailer ~~shall be three hundred thirty dollars (\$330)~~ is one hundred fifty dollars (\$150). The fee for the annual renewal of a license as a designated representative ~~shall be one hundred and ninety-five dollars (\$195)~~ is two hundred fifteen dollars (\$215). The penalty for failure to renew is ~~ninety-seven dollars and fifty cents (\$97.50)~~ is one hundred seven dollars and fifty cents (\$107.50).

~~(r)~~ (t) The fee for a veterinary food-animal drug retailer license is ~~four hundred twenty-five dollars (\$425)~~ four hundred and thirty-five dollars (\$435). The annual renewal fee for a veterinary food-animal drug retailer is ~~three hundred twenty-five dollars (\$325)~~ three hundred

thirty dollars (\$330). The fee for the issuance of a temporary license is two hundred and fifty dollars (\$250). The penalty for failure to renew is ~~one hundred twenty-five dollars (\$125)~~ one hundred fifty dollars (\$150).

~~(s)~~ (u) The fee for the issuance of a retired pharmacist license shall be forty-five dollars (\$45).

~~(t)~~ (v) The fee for the issuance of a centralized hospital packaging pharmacy license ~~shall be \$800~~ is eight hundred twenty dollars (\$820). The annual renewal fee for a centralized hospital packaging pharmacy license ~~shall be \$800~~ is eight hundred five dollars (\$805). The penalty for failure to renew is one hundred fifty dollars (\$150).

(w) The fee for the issuance of an outsourcing facility license is two thousand two hundred seventy dollars (\$2,270). The annual renewal fee for an outsourcing facility is one thousand three hundred twenty-five dollars (\$1,325). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary outsourcing facility license is seven hundred fifteen dollars (\$715).

(x) The fee for the issuance of a nonresident outsourcing facility license is two thousand three hundred eighty dollars (\$2,380). The annual renewal fee for a nonresident outsourcing facility is two thousand two hundred seventy dollars (\$2,270). The penalty for failure to renew is one hundred fifty dollars (\$150).

Note: Authority cited: Sections ~~163.5 and 4005~~ and 4400, Business and Professions Code.

Reference: Sections 163.5, 4005, 4053, 4053.1, 4110, 4112~~(h)~~, 4120, 4128.2, 4129.1, 4129.2, 4196, 4200, 4202, 4208, 4210, 4203, 4304, 4400, 4401 and 4403, Business and Professions Code.

CHAPTER _____

An act to amend Sections 655, 1944, 2733, 2786.5, 2811, 2811.5, 2815, 2815.5, 2816, 2830.7, 2836.3, 2838.2, 4128.2, 4830, 4999, 4999.2, 8516, and 8518 of, to amend, repeal, and add Sections 4400, 7137, and 7153.3 of, to add Sections 2746.53 and 3030 to, to repeal Sections 4999.1, 4999.3, 4999.4, and 4999.6 of, and to repeal and add Sections 2546.9, 2565, 2566, 2566.1, and 4999.5 of, the Business and Professions Code, to amend Section 1348.8 of the Health and Safety Code, and to amend Section 10279 of the Insurance Code, relating to professions and vocations, and making an appropriation therefor.

LEGISLATIVE COUNSEL'S DIGEST

SB 1039, Hill. Professions and vocations.

(1) Existing law requires the Office of Statewide Health Planning and Development to establish the Health Professions Education Foundation to, among other things, solicit and receive funds for the purpose of providing scholarships, as specified.

The bill would state the intent of the Legislature to enact future legislation that would establish a Dental Corps Scholarship Program, as specified, to increase the supply of dentists serving in medically underserved areas.

(2) Existing law, the Dental Practice Act, requires the Dental Hygiene Committee of California to establish by resolution the amount of the fees that relate to the licensing of a registered dental hygienist, a registered dental hygienist in alternative practice, and a registered dental hygienist in extended functions. Existing law prohibits the biennial renewal fee from exceeding \$160. Existing law requires these fees to be deposited in the State Dental Hygiene Fund and makes these moneys subject to appropriation by the Legislature.

This bill would instead prohibit the biennial renewal fee from exceeding \$500.

(3) Existing law makes the State Board of Optometry responsible for the regulation of nonresident contact lens sellers, registered dispensing opticians, spectacle lens dispensers, and contact lens dispensers.

extend to premises that are not registered with the board. Nothing in this section shall be construed to affect the board's ability to investigate alleged unlicensed activity or to inspect premises for which registration has lapsed or is delinquent.

SEC. 24. Section 4128.2 of the Business and Professions Code is amended to read:

4128.2. (a) In addition to the pharmacy license requirement described in Section 4110, a centralized hospital packaging pharmacy shall obtain a specialty license from the board prior to engaging in the functions described in Section 4128.

(b) An applicant seeking a specialty license pursuant to this article shall apply to the board on forms established by the board.

(c) Before issuing the specialty license, the board shall inspect the pharmacy and ensure that the pharmacy is in compliance with this article and regulations established by the board.

(d) A license to perform the functions described in Section 4128 may only be issued to a pharmacy that is licensed by the board as a hospital pharmacy.

(e) A license issued pursuant to this article shall be renewed annually and is not transferrable.

(f) An applicant seeking renewal of a specialty license shall apply to the board on forms established by the board.

(g) A license to perform the functions described in Section 4128 shall not be renewed until the pharmacy has been inspected by the board and found to be in compliance with this article and regulations established by the board.

(h) Until July 1, 2017, the fee for issuance or annual renewal of a centralized hospital packaging pharmacy license shall be six hundred dollars (\$600) and may be increased by the board to eight hundred dollars (\$800).

SEC. 25. Section 4400 of the Business and Professions Code is amended to read:

4400. The amount of fees and penalties prescribed by this chapter, except as otherwise provided, is that fixed by the board according to the following schedule:

(a) The fee for a nongovernmental pharmacy license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520). The fee for the issuance of a temporary nongovernmental pharmacy permit shall be two hundred fifty

dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(b) The fee for a nongovernmental pharmacy license annual renewal shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(c) The fee for the pharmacist application and examination shall be two hundred dollars (\$200) and may be increased to two hundred sixty dollars (\$260).

(d) The fee for regrading an examination shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). If an error in grading is found and the applicant passes the examination, the regrading fee shall be refunded.

(e) The fee for a pharmacist license and biennial renewal shall be one hundred fifty dollars (\$150) and may be increased to one hundred ninety-five dollars (\$195).

(f) The fee for a nongovernmental wholesaler or third-party logistics provider license and annual renewal shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(g) The fee for a hypodermic license and renewal shall be one hundred twenty-five dollars (\$125) and may be increased to one hundred sixty-five dollars (\$165).

(h) (1) The fee for application, investigation, and issuance of a license as a designated representative pursuant to Section 4053, or as a designated representative-3PL pursuant to Section 4053.1, shall be three hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative or designated representative-3PL shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(i) (1) The fee for the application, investigation, and issuance of a license as a designated representative for a veterinary food-animal drug retailer pursuant to Section 4053 shall be three

hundred thirty dollars (\$330) and may be decreased to no less than two hundred fifty-five dollars (\$255).

(2) The fee for the annual renewal of a license as a designated representative for a veterinary food-animal drug retailer shall be one hundred ninety-five dollars (\$195) and may be decreased to no less than one hundred fifty dollars (\$150).

(j) (1) The application fee for a nonresident wholesaler or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(2) For nonresident wholesalers or third-party logistics providers that have 21 or more facilities operating nationwide the application fees for the first 20 locations shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(3) The annual renewal fee for a nonresident wholesaler license or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be decreased to no less than six hundred dollars (\$600).

(k) The fee for evaluation of continuing education courses for accreditation shall be set by the board at an amount not to exceed forty dollars (\$40) per course hour.

(l) The fee for an intern pharmacist license shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). The fee for transfer of intern hours or verification of licensure to another state shall be twenty-five dollars (\$25) and may be increased to thirty dollars (\$30).

(m) The board may waive or refund the additional fee for the issuance of a license where the license is issued less than 45 days before the next regular renewal date.

(n) The fee for the reissuance of any license, or renewal thereof, that has been lost or destroyed or reissued due to a name change shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(o) The fee for the reissuance of any license, or renewal thereof, that must be reissued because of a change in the information, shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(p) It is the intent of the Legislature that, in setting fees pursuant to this section, the board shall seek to maintain a reserve in the Pharmacy Board Contingent Fund equal to approximately one year's operating expenditures.

(q) The fee for any applicant for a nongovernmental clinic license shall be four hundred dollars (\$400) and may be increased to five hundred twenty dollars (\$520) for each license. The annual fee for renewal of the license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325) for each license.

(r) The fee for the issuance of a pharmacy technician license shall be eighty dollars (\$80) and may be increased to one hundred five dollars (\$105). The fee for renewal of a pharmacy technician license shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(s) The fee for a veterinary food-animal drug retailer license shall be four hundred five dollars (\$405) and may be increased to four hundred twenty-five dollars (\$425). The annual renewal fee for a veterinary food-animal drug retailer license shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(t) The fee for issuance of a retired license pursuant to Section 4200.5 shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(u) The fee for issuance or renewal of a nongovernmental sterile compounding pharmacy license shall be six hundred dollars (\$600) and may be increased to seven hundred eighty dollars (\$780). The fee for a temporary license shall be five hundred fifty dollars (\$550) and may be increased to seven hundred fifteen dollars (\$715).

(v) The fee for the issuance or renewal of a nonresident sterile compounding pharmacy license shall be seven hundred eighty dollars (\$780). In addition to paying that application fee, the nonresident sterile compounding pharmacy shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4127.2. If the

required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

(w) This section shall become inoperative on July 1, 2017, and as of January 1, 2018, is repealed.

SEC. 26. Section 4400 is added to the Business and Professions Code, to read:

4400. The amount of fees and penalties prescribed by this chapter, except as otherwise provided, is that fixed by the board according to the following schedule:

(a) The fee for a nongovernmental pharmacy license shall be five hundred twenty dollars (\$520) and may be increased to five hundred seventy dollars (\$570). The fee for the issuance of a temporary nongovernmental pharmacy permit shall be two hundred fifty dollars (\$250) and may be increased to three hundred twenty-five dollars (\$325).

(b) The fee for a nongovernmental pharmacy license annual renewal shall be six hundred sixty-five dollars (\$665) and may be increased to nine hundred thirty dollars (\$930).

(c) The fee for the pharmacist application and examination shall be two hundred sixty dollars (\$260) and may be increased to two hundred eighty-five dollars (\$285).

(d) The fee for regrading an examination shall be ninety dollars (\$90) and may be increased to one hundred fifteen dollars (\$115). If an error in grading is found and the applicant passes the examination, the regrading fee shall be refunded.

(e) The fee for a pharmacist license shall be one hundred ninety-five dollars (\$195) and may be increased to two hundred fifteen dollars (\$215). The fee for a pharmacist biennial renewal shall be three hundred sixty dollars (\$360) and may be increased to five hundred five dollars (\$505).

(f) The fee for a nongovernmental wholesaler or third-party logistics provider license and annual renewal shall be seven hundred eighty dollars (\$780) and may be increased to eight hundred twenty dollars (\$820). The application fee for any

additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(g) The fee for a hypodermic license shall be one hundred seventy dollars (\$170) and may be increased to two hundred forty dollars (\$240). The fee for a hypodermic license renewal shall be two hundred dollars (\$200) and may be increased to two hundred eighty dollars (\$280).

(h) (1) The fee for application, investigation, and issuance of a license as a designated representative pursuant to Section 4053, or as a designated representative-3PL pursuant to Section 4053.1, shall be one hundred fifty dollars (\$150) and may be increased to two hundred ten dollars (\$210).

(2) The fee for the annual renewal of a license as a designated representative or designated representative-3PL shall be two hundred fifteen dollars (\$215) and may be increased to three hundred dollars (\$300).

(i) (1) The fee for the application, investigation, and issuance of a license as a designated representative for a veterinary food-animal drug retailer pursuant to Section 4053 shall be one hundred fifty dollars (\$150) and may be increased to two hundred ten dollars (\$210).

(2) The fee for the annual renewal of a license as a designated representative for a veterinary food-animal drug retailer shall be two hundred fifteen dollars (\$215) and may be increased to three hundred dollars (\$300).

(j) (1) The application fee for a nonresident wholesaler or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be increased to eight hundred twenty dollars (\$820).

(2) For nonresident wholesalers or third-party logistics providers that have 21 or more facilities operating nationwide the application fees for the first 20 locations shall be seven hundred eighty dollars (\$780) and may be increased to eight hundred twenty dollars (\$820). The application fee for any additional location after licensure of the first 20 locations shall be three hundred dollars (\$300) and may be decreased to no less than two hundred twenty-five dollars (\$225). A temporary license fee shall be seven

hundred fifteen dollars (\$715) and may be decreased to no less than five hundred fifty dollars (\$550).

(3) The annual renewal fee for a nonresident wholesaler license or third-party logistics provider license issued pursuant to Section 4161 shall be seven hundred eighty dollars (\$780) and may be increased to eight hundred twenty dollars (\$820).

(k) The fee for evaluation of continuing education courses for accreditation shall be set by the board at an amount not to exceed forty dollars (\$40) per course hour.

(l) The fee for an intern pharmacist license shall be one hundred sixty-five dollars (\$165) and may be increased to two hundred thirty dollars (\$230). The fee for transfer of intern hours or verification of licensure to another state shall be twenty-five dollars (\$25) and may be increased to thirty dollars (\$30).

(m) The board may waive or refund the additional fee for the issuance of a license where the license is issued less than 45 days before the next regular renewal date.

(n) The fee for the reissuance of any license, or renewal thereof, that has been lost or destroyed or reissued due to a name change shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(o) The fee for the reissuance of any license, or renewal thereof, that must be reissued because of a change in the information, shall be one hundred dollars (\$100) and may be increased to one hundred thirty dollars (\$130).

(p) It is the intent of the Legislature that, in setting fees pursuant to this section, the board shall seek to maintain a reserve in the Pharmacy Board Contingent Fund equal to approximately one year's operating expenditures.

(q) The fee for any applicant for a nongovernmental clinic license shall be five hundred twenty dollars (\$520) for each license and may be increased to five hundred seventy dollars (\$570). The annual fee for renewal of the license shall be three hundred twenty-five dollars (\$325) for each license and may be increased to three hundred sixty dollars (\$360).

(r) The fee for the issuance of a pharmacy technician license shall be one hundred forty dollars (\$140) and may be increased to one hundred ninety-five dollars (\$195). The fee for renewal of a pharmacy technician license shall be one hundred forty dollars

(\$140) and may be increased to one hundred ninety-five dollars (\$195).

(s) The fee for a veterinary food-animal drug retailer license shall be four hundred thirty-five dollars (\$435) and may be increased to six hundred ten dollars (\$610). The annual renewal fee for a veterinary food-animal drug retailer license shall be three hundred thirty dollars (\$330) and may be increased to four hundred sixty dollars (\$460).

(t) The fee for issuance of a retired license pursuant to Section 4200.5 shall be thirty-five dollars (\$35) and may be increased to forty-five dollars (\$45).

(u) The fee for issuance of a nongovernmental sterile compounding pharmacy license shall be one thousand six hundred forty-five dollars (\$1,645) and may be increased to two thousand three hundred five dollars (\$2,305). The fee for a temporary license shall be five hundred fifty dollars (\$550) and may be increased to seven hundred fifteen dollars (\$715). The annual renewal fee of the license shall be one thousand three hundred twenty-five dollars (\$1,325) and may be increased to one thousand eight hundred fifty-five dollars (\$1,855).

(v) The fee for the issuance of a nonresident sterile compounding pharmacy license shall be two thousand three hundred eighty dollars (\$2,380) and may be increased to three thousand three hundred thirty-five dollars (\$3,335). The annual renewal of the license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to three thousand one hundred eighty dollars (\$3,180). In addition to paying that application fee, the nonresident sterile compounding pharmacy shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4127.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

(w) The fee for the issuance of an outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and

may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. The fee for the renewal of an outsourcing facility license shall be one thousand three hundred twenty-five dollars (\$1,325) and may be increased to up to one thousand eight hundred fifty-five dollars (\$1,855) by the board. The fee for a temporary outsourcing facility license shall be seven hundred fifteen dollars (\$715).

(x) The fee for the issuance of a nonresident outsourcing facility license shall be two thousand three hundred eighty dollars (\$2,380) and may be increased to up to three thousand three hundred thirty-five dollars (\$3,335) by the board. The fee for the renewal of a nonresident outsourcing facility license shall be two thousand two hundred seventy dollars (\$2,270) and may be increased to up to three thousand one hundred eighty dollars (\$3,180) by the board. In addition to paying that application fee, the nonresident outsourcing facility shall deposit, when submitting the application, a reasonable amount, as determined by the board, necessary to cover the board's estimated cost of performing the inspection required by Section 4129.2. If the required deposit is not submitted with the application, the application shall be deemed to be incomplete. If the actual cost of the inspection exceeds the amount deposited, the board shall provide to the applicant a written invoice for the remaining amount and shall not take action on the application until the full amount has been paid to the board. If the amount deposited exceeds the amount of actual and necessary costs incurred, the board shall remit the difference to the applicant.

(y) The fee for the issuance of a centralized hospital packaging license shall be eight hundred twenty dollars (\$820) and may be increased to one thousand one hundred fifty dollars (\$1,150). The annual renewal of the license shall be eight hundred five dollars (\$805) and may be increased to one thousand one hundred twenty-five dollars (\$1,125).

(z) This section shall become operative on July 1, 2017.

SEC. 27. Section 4830 of the Business and Professions Code is amended to read:

4830. (a) This chapter does not apply to:

(1) Veterinarians while serving in any armed branch of the military service of the United States or the United States Department of Agriculture while actually engaged and employed in their official capacity.

Attachment 5

Senate Bill No. 952

CHAPTER 150

An act to amend Section 4202 of the Business and Professions Code, relating to healing arts.

[Approved by Governor August 19, 2016. Filed with
Secretary of State August 19, 2016.]

LEGISLATIVE COUNSEL'S DIGEST

SB 952, Anderson. Pharmacy technicians: licensure requirements.

The Pharmacy Law provides for the licensure and regulation of pharmacists and pharmacy technicians by the California State Board of Pharmacy. Existing law authorizes the California State Board of Pharmacy to issue a pharmacy technician license to an individual if that individual is a high school graduate or possesses a general educational development certificate equivalent and has obtained an associate's degree in pharmacy technology, completed a specified course of training, graduated from a specified school of pharmacy, or is certified by the Pharmacy Technician Certification Board.

This bill would substitute for the Pharmacy Technician Certification Board a pharmacy technician certifying organization offering a pharmacy technician certification program accredited by the National Commission for Certifying Agencies that is approved by the California State Board of Pharmacy.

The people of the State of California do enact as follows:

SECTION 1. Section 4202 of the Business and Professions Code is amended to read:

4202. (a) The board may issue a pharmacy technician license to an individual if he or she is a high school graduate or possesses a general educational development certificate equivalent, and meets any one of the following requirements:

- (1) Has obtained an associate's degree in pharmacy technology.
- (2) Has completed a course of training specified by the board.
- (3) Has graduated from a school of pharmacy recognized by the board.
- (4) Is certified by a pharmacy technician certifying organization offering a pharmacy technician certification program accredited by the National Commission for Certifying Agencies that is approved by the board.

(b) The board shall adopt regulations pursuant to this section for the licensure of pharmacy technicians and for the specification of training courses as set out in paragraph (2) of subdivision (a). Proof of the

qualifications of any applicant for licensure as a pharmacy technician shall be made to the satisfaction of the board and shall be substantiated by any evidence required by the board.

(c) The board shall conduct a criminal background check of the applicant to determine if an applicant has committed acts that would constitute grounds for denial of licensure, pursuant to this chapter or Chapter 2 (commencing with Section 480) of Division 1.5.

(d) The board may suspend or revoke a license issued pursuant to this section on any ground specified in Section 4301.

(e) Once an individual is licensed as a pharmacist, the pharmacy technician registration is no longer valid and the pharmacy technician license shall be returned to the board within 15 days.

Proposal to Add Section 1793.65

1793.65 Pharmacy Technician Certification Programs Approved by the Board.

a. Pursuant to Business and Professions Code section 4202(a)(4), the board approves the following pharmacy technician certification programs until January 1, 2021:

1. Pharmacy Technician Certification Board, and
2. National Healthcareer Association's Examination for the Certification of Pharmacy Technicians Program.

b. Approval of these programs is valid through December 31, 2020.

Note: Authority cited: Business and Professions Code Sections 4005 and 4202. Reference: Business and Professions Code Sections 4005, 4038 and 4202.

ELLISON WILSON ADVOCACY, LLC

GOVERNMENTAL AFFAIRS - LEGISLATIVE ADVOCACY

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Legislative Advocate

BOB WILSON

Attorney at Law
Member, California State Senate (ret.)
Member, California State Assembly (ret.)

KIRK BLACKBURN

Legislative Advocate
Attorney at Law

September 12, 2016

Board of Pharmacy
Licensing Committee
1625 North Market Boulevard
Sacramento CA 95834

Re: Request for Approval of NHA under SB 952 as a pharmacy technician certifying organization

Dear Licensing Committee Members:

SB 952, which unanimously passed both houses of the legislature, was signed into law by the Governor on August 19, 2016 and will take effect January 1, 2017. This bill, which was introduced pursuant to the suggestion of the Committee, revises Business and Professions Code section 4202 regarding one of the paths to licensure for Pharmacy Technicians in California.

Section 4202 outlines four paths to licensure for a high school graduate/GED certificate holder:

- (1) obtaining an associate's degree in pharmacy technology.
- (2) completing a course of training specified by the board.
- (3) graduating from a school of pharmacy recognized by the board.
- (4) certification.

SB 952 modified the fourth path regarding certification. Previously, the section stated that an individual could obtain a license if he or she "[i]s certified by the Pharmacy Technician Certification Board." As you know, this statutory language stemmed from a period when PTCB was the only national certifying organization. Since that time, NHA, the sponsor of SB 952, entered the market and has administered the ExCPT exam across the country for ten years. Like the PTCE, the ExCPT is accredited by the National Commission for Certifying Agencies and is approved by dozens of Boards of Pharmacy to satisfy licensing requirements.

SB 952 was enacted to eliminate the statutory monopoly created by naming only one certifying organization and to instead allow open market competition among providers, which in turn will enable consumers to have more access and choices. SB 952 modifies the language so that it now states "[i]s certified by a pharmacy technician certifying organization offering a pharmacy technician certification program accredited by the National Commission for Certifying Agencies that is approved by the board." This language was supported by the Board of Pharmacy during the legislative process.

NHA has appeared before both the Licensing Committee and the full Board of Pharmacy several times this year. NHA has educated the Board not only about the ExCPT exam that it administers, but has also provided independent reports about Pharmacy Technician employment and job market statistics on both the state and national level to help this Committee in its ongoing efforts to modify the entry level requirements for Pharm Techs so as to improve overall quality of care.

This Committee and the Board also have had the benefit of an independent report by the Office of Professional Exam Services, which evaluated both NHA's ExCPT and PTCB's PTCE exams. The OPES evaluation found both exams to meet professional guidelines and technical standards. Based on the comprehensive review by OPES, the Committee concluded at its January 6, 2016 meeting that "... the ExCPT has demonstrated that it meets the requirements to provide the pharmacy technician certification examination." This Committee and its staff has spent a considerable amount of time and resources evaluating the accredited certification exams, including NHA's ExCPT exam, and ultimately the Board supported NHA's legislation to open the certification route to licensure to free competition.

Accordingly, we request that this Committee recommend to the full Board that it approve NHA as a pharmacy technician certifying organization effective January 1, 2017, at the next full Board meeting in October. This recommendation reflects the considered judgment of this Committee, the Board, and staff that NHA's ExCPT exam is a valuable addition to the California marketplace.

Thank you for your consideration in this matter.

Sincerely,



Patrick Whalen

Attachment 6

Title 16. Board of Pharmacy

Proposed Language

To Amend Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

Article 10. ~~Wholesalers~~ Dangerous Drug Distributors

To Amend Section 1780 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1780. Minimum Standards for ~~Wholesalers~~.

The following minimum standards shall apply to all wholesale and third-party logistics provider establishments for which permits have been issued by the Board:

- (a) A wholesaler and a third-party logistics provider shall store dangerous drugs in a secured and lockable area.
- (b) All wholesaler and third-party logistics provider premises, fixtures and equipment therein shall be maintained in a clean and orderly condition. Wholesale and third-party logistics provider premises shall be well ventilated, free from rodents and insects, and adequately lighted. Plumbing shall be in good repair. Temperature and humidity monitoring shall be conducted to assure compliance with the United States Pharmacopeia Standards (1990, 22nd Revision) official compendium.
- (c) Entry into areas where prescription drugs are held shall be limited to authorized personnel.
 - (1) All facilities shall be equipped with an alarm system to detect entry after hours.
 - (2) All facilities shall be equipped with a security system that will provide suitable protection against theft and diversion. When appropriate, the security system shall provide protection against theft or diversion that is facilitated or hidden by tampering with computers or electronic records.
 - (3) The outside perimeter of the ~~wholesaler~~ premises shall be well-lighted.
- (d) All materials must be examined upon receipt and/or before shipment.
 - (1) Upon receipt, each outside shipping container shall be visually examined for identity and to prevent the acceptance of contaminated prescription drugs or prescription drugs that are otherwise unfit for distribution. This examination shall be adequate to reveal container damage that would suggest possible contamination or other damage to the contents.
 - (2) Each outgoing shipment shall be carefully inspected for identity of the prescription drug products and to ensure that there is no delivery of prescription drugs that have been damaged in storage or held under improper conditions.
- (e) The following procedures must be followed for handling returned, damaged and outdated prescription drugs.
 - (1) Prescription drugs that are outdated, damaged, deteriorated, misbranded or adulterated shall be placed in a quarantine area and physically separated from other drugs until they are destroyed or returned to their supplier.
 - (2) Any prescription drugs whose immediate or sealed outer or sealed secondary containers have been opened or used shall be identified as such, and shall be placed in a quarantine area and physically separated from other prescription drugs until they are either destroyed or returned to the supplier.
 - (3) If the conditions under which a prescription drug has been returned cast doubt on the drug's safety, identity, strength, quality or purity, the drug shall be destroyed or returned to the supplier unless testing or other investigation proves that the drug meets appropriate United States Pharmacopeia Standards (1990, 22nd Revision).
- (f) Policies and procedures must be written and made available upon request by the board.
 - (1) Each ~~W~~ wholesaler and third-party logistics provider ~~drug distributors~~ shall establish, maintain, and adhere to written policies and procedures, which shall be followed for the receipt, security,

storage, inventory and distribution of prescription drugs, including policies and procedures for identifying, recording, and reporting losses or thefts, for correcting all errors and inaccuracies in inventories, and for maintaining records to document proper storage.

- (2) The records required by paragraph (1) shall be in accordance with Title 21, Code of Federal Regulations, Section 205.50(g). These records shall be maintained for three years after disposition of the drugs.
- (3) ~~Each~~ wholesaler and third-party logistics provider ~~drug distributors~~ shall establish and maintain lists of officers, directors, managers and other persons in charge of ~~wholesale~~ drug distribution, storage and handling, including a description of their duties and a summary of their qualifications.
- (4) Each wholesaler and third-party logistics provider shall provide adequate training and experience to assure compliance with licensing requirements by all personnel.
- (g) The board shall require an applicant for a licensed premise or for renewal of that license to certify that it meets the requirements of this section at the time of licensure or renewal.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4043, ~~4045~~, 4051, 4053, ~~4053.1~~, 4054, 4059, 4120, 4160, 4161 and 4304, Business and Professions Code; Section 321 of Title 21, U.S. Code; and Section 205.05 of Title 21, Code of Federal Regulations.

To Amend Section 1781 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1781. ~~Exemption Certificate~~ Designated Representative.

A registered pharmacist, ~~or an~~ designated representative or designated representative –3PL certified in accordance with Section 4053, 4053.1 or 4054 of the Business and Professions Code shall be present and in control of a manufacturer's, ~~or~~ wholesaler's or a third-party logistics provider's licensed premises during the conduct of business.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4053, 4053.1 or 4054, Business and Professions Code.

To Amend Section 1782 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1782. Reporting Sales of Drugs Subject to Abuse.

~~All~~ Each manufacturers, ~~and~~ wholesalers and third-party logistics provider shall report to the Board or its designee, up to twelve (12) times a year, all sales of dangerous drugs subject to abuse as designated by the Board for reporting, in excess of amounts to be determined by the Board from time to time. Reports shall be made within thirty (30) days of the request in the form specified by the Board.

Authority cited: Sections ~~4005 and 4164~~, Business and Professions Code; ~~and Section 26692, Health and Safety Code~~. Reference: Sections 4053.1, 4081, 4164, and 4332, Business and Professions Code; ~~and Section 26692, Health and Safety Code~~.

To Amend Section 1786 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1783. Manufacturer, ~~or~~ Wholesaler or Third-Party Logistics Provider Furnishing Drugs and Devices.

- (a) A manufacturer, ~~or~~ wholesaler or third-party logistics provider shall furnish dangerous drugs or devices only to an authorized person; prior to furnishing dangerous drugs and devices to a person not known to the furnisher, the manufacturer, ~~or~~ wholesaler, or third-party logistics provider shall contact the board or, if the person is licensed or registered by another government entity, that entity, to confirm the recipient is an authorized person.
- (b) “Authorized person” means a person to whom the board has issued a permit which enables the permit holder to purchase dangerous drugs or devices for use within the scope of its permit. “Authorized person” also means any person in this state or in another jurisdiction within the United States to the extent such furnishing is authorized by the law of this state, any applicable federal law, and the law of the jurisdiction in which that person is located. The manufacturer, ~~or~~ wholesaler or third-party logistics provider furnishing to such person shall, prior to furnishing the dangerous drugs and devices, establish the intended recipient is legally authorized to receive the dangerous drugs or devices.
- (c) Dangerous drugs or devices furnished by a manufacturer, ~~or~~ wholesaler or third-party logistics provider shall be delivered only to the premises listed on the permit; provided that a manufacturer, ~~or~~ wholesaler or third-party logistics provider may furnish drugs to an authorized person or an agent of that person at the premises of the manufacturer, ~~or~~ wholesaler or third-party logistics provider if (1) the identity and authorization of the recipient is properly established and (2) this method of receipt is employed only to meet the immediate needs of a particular patient of the authorized person. Dangerous drugs or devices may be furnished to a hospital pharmacy receiving area provided that a pharmacist or authorized receiving personnel signs, at the time of delivery, a receipt showing the type and quantity of the dangerous drugs or devices so received. Any discrepancy between the receipt and the type and quantity of dangerous drugs and devices actually received shall be reported to the delivering manufacturer, ~~or~~ wholesaler or third-party logistics provider by the next business day after the delivery to the pharmacy receiving area.
- (d) A manufacturer, ~~or~~ wholesaler or third-party logistics provider shall not accept payment for or allow the use of an entity's credit to establish an account for the purchase of dangerous drugs or devices from any person other than: (1) the owner(s) of record, chief executive officer, or chief financial officer listed on the permit for the authorized person; and (2) on an account bearing the name of the permittee.
- (e) All records of dangerous drugs or devices furnished by a manufacturer, ~~or~~ wholesaler or third-party logistics provider to an authorized person shall be preserved by the authorized person for at least three years from the date of making and shall, at all times during business hours, be open to inspection by authorized officers of the law at the licensed premises. The manufacturer, ~~or~~ wholesaler or third-party logistics provider shall also maintain all records of dangerous drugs or devices furnished pursuant to this section for at least three years from the date of making and shall, at all times during business hours, keep them open to inspection by authorized officers of the law at the premises from which the dangerous drugs or devices were furnished.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4043, 4053.1, 4059, 4059.5, 4080, 4081, 4120, 4160, 4161, 4163 and 4304, Business and Professions Code; and Section 11209, Health and Safety Code.

Attachment 7

Health Professions Education Foundation

Let us help you help others





Who we are

The Health Professions Education Foundation (HPEF) is a state non-profit established in 1987. Since 1987, HPEF has awarded more than 12,882 scholarships and loan repayments totaling \$146.7 million to California health professionals serving all 58 counties.

Our Mission

HPEF aims to improve healthcare in underserved areas of California by providing scholarships and loan repayments to those who are dedicated to providing direct patient care in those areas.



A look at our programs

HPEF offers 13 scholarship and loan repayment programs to students and health professionals who agree to provide direct patient care for one to three years in California's underserved communities.

Scholarship Programs

Allied Healthcare Scholarship Program

Vocational Nurse Scholarship Program

Licensed Vocational Nurse to Associate Degree Nursing Scholarship Program

Associate Degree Nursing Scholarship Program

Bachelor of Science Nursing Scholarship Program

Advanced Practice Healthcare Scholarship Program

Loan Repayment Programs

Allied Healthcare Loan Repayment Program

Licensed Vocational Nurse Loan Repayment Program

Bachelor of Science Nursing Loan Repayment Program

Advanced Practice Healthcare Loan Repayment Program

Mental Health Loan Assumption Program

Licensed Mental Health Services Provider Education Program

Steven M. Thompson Physician Corps Loan Repayment Program



Advanced Practice Healthcare Loan Repayment Program

Purpose:

- To increase the number of advanced practice health professionals practicing in medically underserved areas of California

Funded by:

- This program is only funded through grants and donations
 - The California Endowment Grant which ends July 31, 2017
 - The California Wellness Grant which ends December 31, 2017

Eligible Professions:

Certified Nurse Midwives, Clinical Nurse Specialist, Dentists, Nurse Practitioners, Occupational Therapists, Pharmacists, Physical Therapists, Physician Assistants, Speech Language Pathologists

Award Amounts:

- May be based on a granter's specifications
- Currently up to \$50,000 in exchange for two years of service

A Closer Look at Our Loan Repayment Programs

Advanced Practice Healthcare Loan Repayment Program

Application cycle opens August 1, 2016 and ends November 18, 2016

Who may apply?

To be eligible for the Advanced Practice Healthcare Loan Repayment Program (Formerly Health Professions Education Loan Repayment Program), the applicant must:

- be currently licensed and practicing in one of the following professions:
If you are in a dental profession, click the link below
 - Certified Nurse Midwives
 - Clinical Nurse Specialists
 - [Dentist](#)
 - Nurse Practitioners
 - Occupational Therapists
 - Pharmacists
 - Physical Therapists
 - Physician Assistants
 - Speech Therapists
- be providing direct patient care 32+ hours or more a week
- be working in a qualified facility
- be in good standing with respective Board or Committee
- have outstanding educational debt from a commercial or U.S. governmental lending institution
- be free from any other service obligation, including other HPEF programs
- have valid legal presence and ability to work and provide care in the state of California
- be willing to continue working in a medically underserved area for twenty-four (24) months
- complete and submit your application through [CalREACH](#) by the application deadline



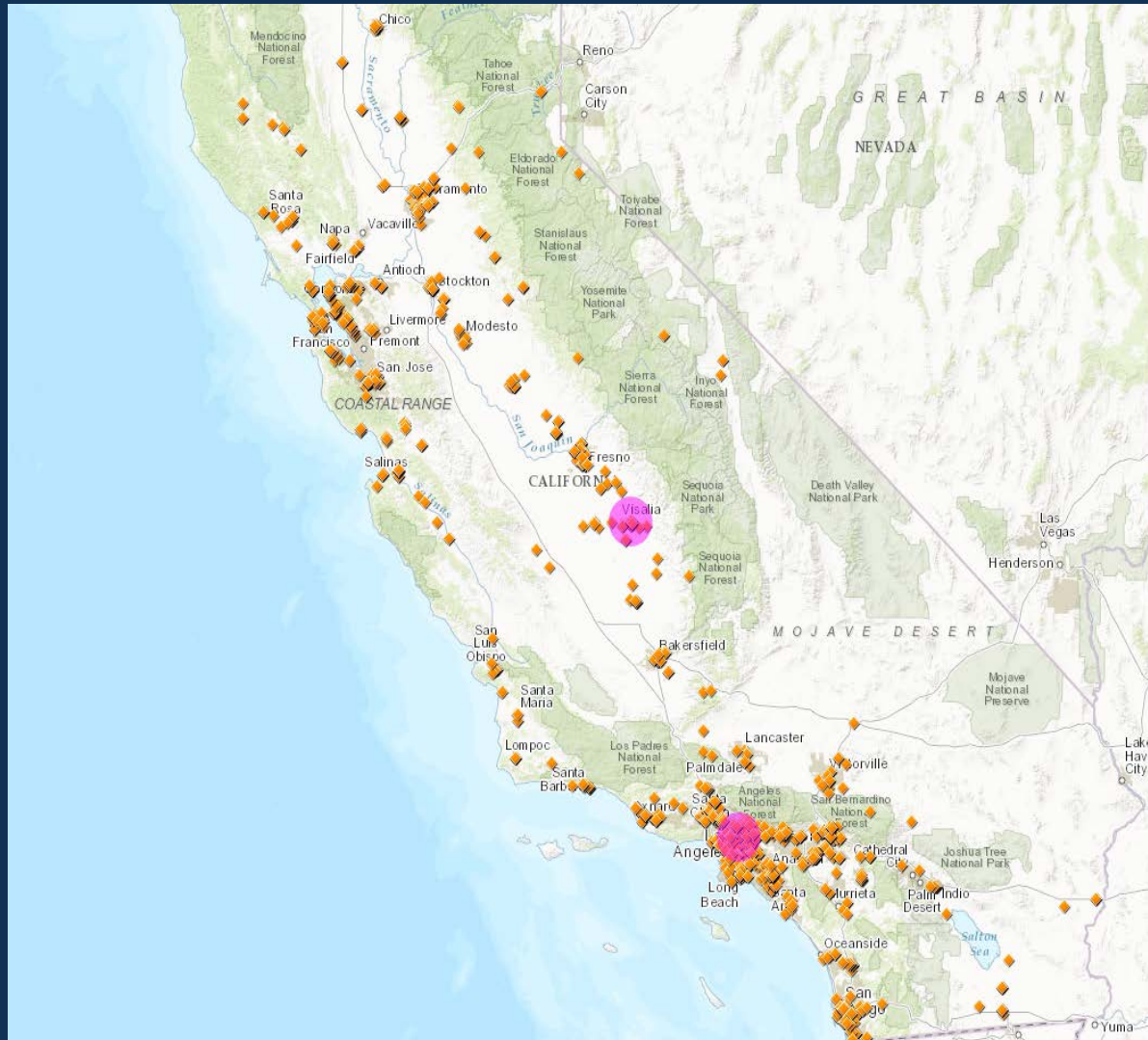
Award Statistics

Program	Cycle Year	# of Apps Received	# of Apps Reviewed	# Able to Award Due to Score & Eligibility	# Awarded Based on Available Funding
APHLRP	2015-2016	287	207	163	39

2015-2016 data is as of June 30, 2016.

Clinical Pharmacists

2015-16 HPEF Award Statistics



Awardee Info

APHLRP recipient, Los Angeles

◆ **\$37500 awarded**, Loan Repayment
LaC-Usc Medical Center

APHLRP recipient, Visalia

◆ **\$37500 awarded**, Loan Repayment
Kaweah Delta Health Care District

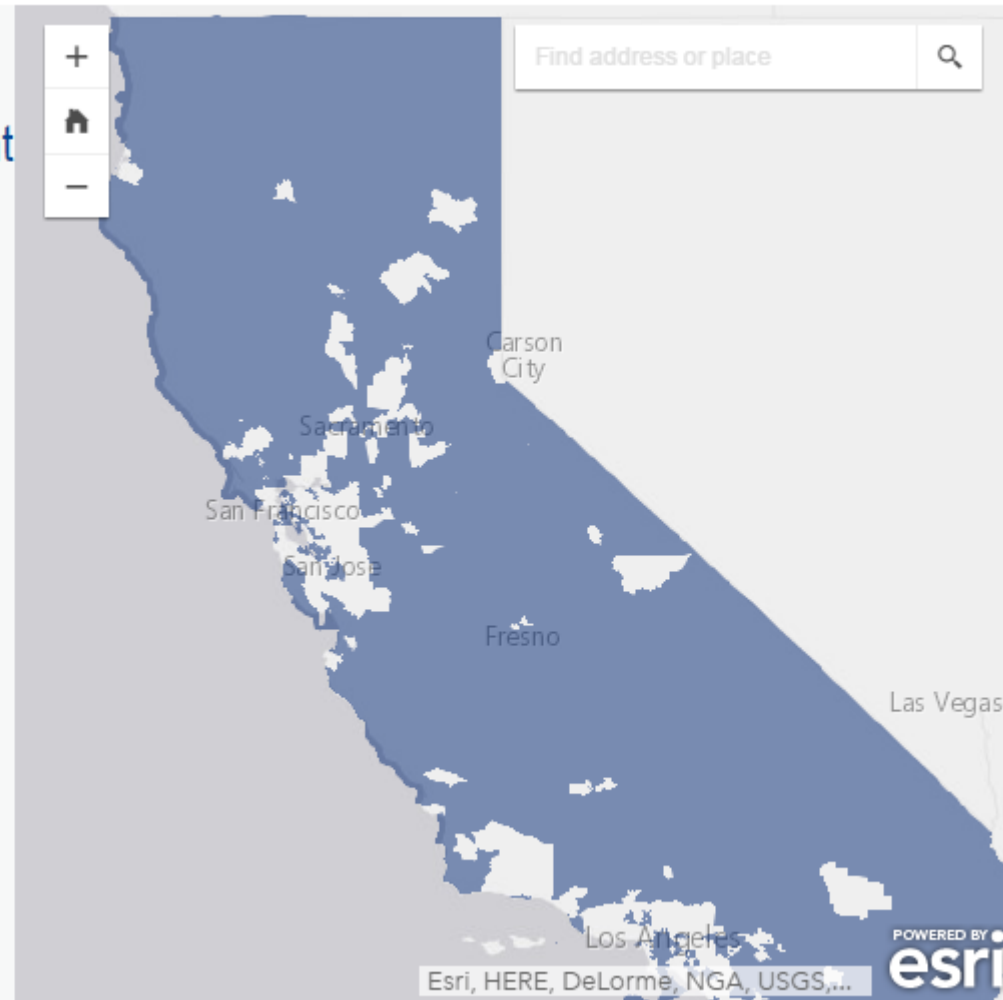
What is a Qualified Facility?

- Medically Underserved Area (MUA)
- Medically Underserved Populations (MUP)
- Primary Care Shortage Areas (PCSA)
- Health Professional Shortage Area Primary Care (HPSA-PC)
- Federally Qualified Healthcare Centers (FQHC)
- County Facilities, Veterans Facilities, Correctional Facilities & Indian Health Centers

How to Determine if a Facility Qualifies

Advanced Practice Healthcare Loan Repayment Program Map

Enter an address in the map search bar to determine whether a worksite falls in a Medically Underserved Area (MUA), Medically Underserved Population (MUP), Primary Care Shortage Area (PCSA) or Health Professional Shortage Area- Primary Care (HPSA-PC). If the worksite falls in a shaded area, it qualifies for the Advanced Practice Healthcare Loan Repayment Program. Other types of qualifying facilities not shown on this map include: county facilities, veterans facilities, correctional facilities, federally qualified health centers and indian health centers. If your worksite does not fall in a shaded area, but may qualify through another designation, please contact a member of our [program staff](#).



[View larger map](#)

How to Apply

- Application cycles are opened annually for eight to sixteen weeks depending on the program. Check the HPEF or CalREACH sites for exact dates.
- Advanced Practice Healthcare Loan Repayment Program is open now until November 18, 2016.
- Applicants must apply online through the CalREACH website:
 - calreach.oshpd.ca.gov
- Awards may be received more than once depending on program!



Connect with us

Health Professions Education Foundation

400 R Street, Suite 460
Sacramento, CA 95811
Phone: (800) 773-1669

Email: HPEF-Email@oshpd.ca.gov

www.oshpd.ca.gov/HPEF



@Healthprofcagov



HealthProfessions
EdFoundation



Attachment 8



nabp

National Association of Boards of Pharmacy

1600 Feehanville Drive • Mount Prospect, IL 60056-6014
Tel: 847/391-4406 • Fax: 847/391-4502
Web Site: www.nabp.net

TO: EXECUTIVE OFFICERS – STATE BOARDS OF PHARMACY
FROM: Carmen A. Catizone, Executive Director/Secretary
DATE: July 28, 2016
RE: NAPLEX Program Notification

The National Association of Boards of Pharmacy (NABP) would like to notify the boards of pharmacy regarding the implementation of the upcoming changes to the North American Pharmacist Licensure Examination (NAPLEX) and the Association's efforts to alert candidates with open, active registrations for the current exam.

The NAPLEX program will transition to a new administration model in November 2016, and the upcoming changes were detailed in a memo sent to the member boards on March 3, 2016. Changes to the NAPLEX include an increase in the number of items from 185 to 250, an increase in testing time to six hours, and an increase in the registration fee from \$505 to \$575. In addition, effective November 1, 2016, the NAPLEX waiting period will be 45 days. Candidates must wait at least 45 days to schedule another attempt after obtaining a failing score on the NAPLEX.

Via email, NABP will be notifying candidates with open, active NAPLEX registrations of the following deadlines:

- The last day to take the current NAPLEX is October 22, 2016. Candidates wishing to take the current exam must:
 - Register by October 3, 2016,
 - Be granted eligibility and receive an Authorization to Test, and
 - Schedule and take the exam by October 22, 2016.
- The NAPLEX will not be administered October 24-31, 2016.
- The new NAPLEX will launch on November 1, 2016.

For candidates with open, active registrations who are unable to test by October 22, 2016, their registrations will remain active and they may schedule an appointment to take the new NAPLEX on or after November 1, 2016.

Candidates who graduate in 2017 should not register for the current NAPLEX since they are not eligible to sit for the current exam. Should any such candidates register for the current exam, their record will be closed and a partial refund granted per the NABP refund policy. The

EXECUTIVE OFFICERS – STATE BOARDS OF PHARMACY

July 28, 2016

Page 2

candidate would then need to register for the new NAPLEX after November 1, 2016, and pay the new fee of \$575.

Detailed information on the changes to the exam and the above deadlines will be published the week of August 1, 2016 on the NABP website (in the NAPLEX section, under Programs) and in the *NAPLEX/MPJE Candidate Registration Bulletin*. This information has also been provided to the schools and colleges of pharmacy.

If there are any questions regarding the updates to the NAPLEX program, please contact Maria Incrocci, competency assessment senior manager, at mincrocci@nabp.net or 847/391-4400.

cc: NABP Executive Committee

NABP Advisory Committee on Examinations

Attachment 9



Marshall B.
KETCHUM UNIVERSITY
College of Pharmacy

Office of the Dean

September 12, 2016

California State Board of Pharmacy
Department of Consumer Affairs
1625 N. Market Blvd, N219, Sacramento, CA 95834
Phone: (916) 574-7900
Fax: (916) 574-8618
www.pharmacy.ca.gov

Dear Board Members:

On July 21, 2016 the Accreditation Council for Pharmacy Education awarded Marshall B Ketchum University College of Pharmacy (MBKUCOP) Pre-Candidate status. I am requesting that the State Board of Pharmacy recognize the program at MBKCOP for purposes of issuing intern pharmacist licenses to students enrolled in our program. I attach an overview of our program for your perusal.

Thank you for your consideration.

Respectfully submitted,

Edward Fisher, PhD, RPh
Professor and Dean



Pharmacy Program

Ketchum University
2575 Yorba Linda Blvd
Fullerton CA 92831
714.449.7461

9/9/2016

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The College of Pharmacy Vision

The College of Pharmacy at Marshall B. Ketchum University will be a recognized innovator and provider of distinctive, highest quality, evidence-based pharmaceutical education, scholarship, research, and community outreach.

The College of Pharmacy Mission

The mission of the College of Pharmacy at Marshall B. Ketchum University is to educate individuals to become ethical, competent, and compassionate pharmacists who can deliver quality patient-centered pharmaceutical care and services in diverse environments and systems of healthcare, with a commitment to innovative research and scholarship.

Our Goals

To achieve our Mission, our Program Goals are to:

1. Maintain a culture of interprofessional education through extensive interdisciplinary interactions between the students of the university's health profession programs.
2. Establish and maintain accountability in the college through periodic and systematic assessments measuring the attainment of program outcomes, followed by stakeholder analysis and maintenance of an ongoing plan for continuous improvement.
3. Recruit and educate highly qualified students who will excel in the profession and in advanced pharmacy practice.
4. Recruit, mentor and retain outstanding faculty who are leaders in their own disciplines to strengthen the academic and scholarship programs at the college.
5. Provide a comprehensive, innovative, and integrated curriculum that leads to assimilation and application, which fully prepares students for licensure and entry level practice upon graduation.
6. Create opportunities to participate in interprofessional clinical practice experiences based on current and developing evidence-based standards, care delivery systems and teamwork.
7. Develop learning/service opportunities in the community, rural and underserved areas, while motivating our students to demonstrate cultural sensitivity and respect.
8. Design and sustain a technology-based, inclusive, student-centered instructional environment that supports a wide array of active/participatory learning techniques.
9. Develop students as self-motivated, life-long learners through problem-solving, focused analysis, critical thinking, and self-directed learning in curricular and co-curricular activities.
10. Promote and provide leadership, patient advocacy, and professional development opportunities for our students that foster community awareness of the role and value of the pharmacy profession while encouraging service, entrepreneurship, and local/global partnerships.
11. Provide support and professional development opportunities to enable faculty to maintain excellence in teaching, scholarship, research, leadership, and service.

Program Overview

It takes four academic years to complete the Doctor of Pharmacy program . The first year curriculum provides the foundation for professional practice with instruction on pharmaceutical and biomedical sciences, body systems and disease, epidemiology, public health, pharmaceutical self-care, pharmacy law and roles of the pharmacist. The curriculum teaches United States and global health care systems, interpersonal and interprofessional communications, pre-clinical laboratory skills, pharmacy practice skills and provides certifications in immunization and life support. Students will begin Introductory Pharmacy Practice Experiences courses (IPPE). The second year curriculum continues to build on the foundation courses from year one with instruction on applied biomedical sciences, pharmacology, clinical medicine and pharmacotherapeutics. The curriculum teaches professional ethics, behavioral aspects of health, drug information, evidence-based practice, research methodology, biostatistics, pharmacokinetics and

basics of laboratory medicine. Students continue with IPPE courses. The third year curriculum continues with focused instruction on the principles of clinical medicine and pharmacotherapeutics. The curriculum incorporates biotechnology, pharmacogenomics, pharmacoeconomics, special populations and contains a skills lab for clinical and evidence-based reasoning and certification in medication therapy management. The curriculum includes a doctoral level capstone project and provides students an opportunity to take three didactic electives of their choice. The fourth year, also known as the experiential year curriculum lists all the Advanced Pharmacy Practice Experience courses. Students will also take APPE electives of their choice. The Case Conferences will consist of reflection sessions that discuss pertinent clinical areas through case studies and will provide a North American Pharmacist Licensure Examination (NAPLEX) preparatory course to assess NAPLEX readiness. The degree of Doctor of Pharmacy will be conferred on students who are officially admitted to, and who satisfactorily complete the four-year professional curriculum in pharmacy. Satisfactory completion of the Doctor of Pharmacy program will academically qualify the graduate to apply for licensure in each of the 50 states.

College of Pharmacy Pharm.D. Curriculum

First Professional Year Curriculum

The first year curriculum provides the foundation for professional practice with instruction on pharmaceutical and biomedical sciences, body systems and disease, public health, pharmaceutical self-care, pharmacy law and roles of the pharmacist. The curriculum also teaches US and global health care systems, interpersonal and interprofessional communications, pre-clinical laboratory skills, pharmacy practice skills, and provides certifications in immunization and life support.

First Year Fall Quarter (Aug – Nov)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 501	Foundations of Human Body and Disease I & Patient Assessment Lab I	22	22	3.0
PHM 510	Integrated Microbiology & Virology	33	0	3.0
PHM 520	Pharmaceutical Sciences I: Physical Pharmacy & Dosage Forms	33	0	3.0
PHM 530	Pharmaceutical Biochemistry	33	0	3.0
PHM 540	Professional Practice & Healthcare Systems	22	0	2.0
PHM 550	Pharmacy Skills Lab I – Community	0	22	1.0
PHM 401	Medical Ethics (IPE 401)	11	11	1.5
Total		154	55	16.5

First Year Winter Quarter (Nov- Feb)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 502	Foundations of Human Body and Disease II & Patient Assessment Lab II	22	22	3.0
PHM 511	Integrated Immunology	22	0	2.0
PHM 521	Pharmaceutical Sciences II: Calculations	22	33	3.5
PHM 560	Pharmacy Law	22	0	2.0

PHM 541	Pharmacy Communications, Management & Leadership	33	0	3.0
PHM 551	Pharmacy Skills Lab II – Community	0	22	1.0
PHM 403	Population and Public Health (IPE 403)	22	0	2.0
Total		143	77	16.5

First Year Spring Quarter (Feb- May)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 503	Foundations of Human Body and Disease III & Patient Assessment Lab III	22	22	3.0
PHM 531	Integrated Pharmacology and Medicinal Chemistry I	44	0	4.0
PHM 522	Pharmaceutical Sciences III: Dosage Forms & Compounding	22	44	4.0
PHM 552	Pharmacy Skills Lab III – Hospital	0	22	1.0
PHM 580	Pharmaceutical Self Care and Patient Advocacy I	22		2.0
PHM 581	Medical Spanish	0	22	1.0
Total		110	110	15.0

IPE- Interprofessional Education courses that are taken by OD, PA, and Pharmacy students

Second Professional Year Curriculum

The second year curriculum continues to build on the foundation courses from year one with instruction on applied biomedical sciences, pharmacology, clinical medicine and pharmacotherapeutics. The curriculum also teaches behavioral aspects of health, drug information, evidence-based practice, research methodology, biostatistics, pharmacokinetics and basics of laboratory medicine. Students will begin Introductory Pharmacy Practice Experiences (IPPE) courses.

Second Year Summer Quarter (Jun- Aug)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 670	IPPE I (4 weeks)	0	0	4.0
PHM 650	Pharmaceutical Self Care and Patient Advocacy II	22		2.0
Total		22	0	6.0

Second Year Fall Quarter (Aug – Nov)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 601	Integrated Pharmacology and Medicinal Chemistry II	33	0	3.0
PHM 610	Drug Information, Informatics & Literature Evaluation	22	0	2.0
PHM 620	Research Methodology &	22	0	2.0

	Biostatistics			
PHM 630	Clinical Medicine & Pharmacotherapeutics I	44	22	5.0
PHM 651	Pharmaceutical Self Care and Patient Advocacy III	22		2.0
PHM 640	Pharmacy Skills Lab IV – Telehealth/Laboratory Medicine	0	22	1.0
Total		143	44	15.0

Second Year Winter Quarter (Nov- Feb)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 602	Integrated Pharmacology and Medicinal Chemistry III	33	0	3.0
PHM 631	Clinical Medicine & Pharmacotherapeutics II	33	22	4.0
PHM 632	Clinical Medicine & Pharmacotherapeutics III	33	22	4.0
PHM 660	Basic Pharmacokinetics	33	0	3.0
PHM 680	Capstone Project I		11	0.5
PHM 641	Pharmacy Skills Lab V – Clinical	0	22	1.0
Total		132	77	15.5

Second Year Spring Quarter (Feb- May)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 603	Integrated Pharmacology and Medicinal Chemistry IV	33	0	3.0
PHM 633	Clinical Medicine & Pharmacotherapeutics IV	44	22	5.0
PHM 634	Clinical Medicine & Pharmacotherapeutics V	44	22	5.0
PHM 661	Clinical Pharmacokinetics	22		2.0
PHM 621	Behavioral & Social Science	22	0	2.0
Total		165	44	17.0

Third Professional Year Curriculum

The third year curriculum continues with focused instruction on the principles of clinical medicine and pharmacotherapeutics. The curriculum also incorporates biotechnology, pharmacogenomics, pharmacoeconomics, special populations and contains skills lab for clinical / evidence-based reasoning and certification in medication therapy management. The curriculum also includes a doctoral level capstone project and provides students an opportunity to take three didactic electives of their choice. Students continue with IPPE courses.

Third Year Summer Quarter (Jun- Aug)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 671	IPPE II (4 weeks)	0	0	4.0
PHM 701	Pharmacoeconomics	22	0	2.0
Total		22	0	6.0

Third Year Fall Quarter (Aug – Nov)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 710	Clinical Medicine & Pharmacotherapeutics VI	44	22	5.0
PHM 711	Clinical Medicine & Pharmacotherapeutics VII	44	22	5.0
PHM 720	Elective I	22	0	2.0
PHM 730	Pharmacy Skills Lab VI - Clinical	0	22	1.0
PHM 750	Capstone Project II		11	0.5
PHM 404	IPE Case conference			0
Total		110	77	13.5

Third Year Winter Quarter (Nov- Feb)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 740	Biotechnology, Pharmacogenomics & Precision Medicine	33	0	3.0
PHM 712	Clinical Medicine & Pharmacotherapeutics VIII	33	22	4.0
PHM 713	Clinical Medicine & Pharmacotherapeutics IX	33	22	4.0
PHM 721	Elective II	22	0	2.0
PHM 731	Pharmacy Skills Lab VII – Clinical	0	22	1.0
PHM 404	IPE Case conference			0
Total		121	66	14.0

Third Year Spring Quarter (Feb- May)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 760	Special Populations (Pediatrics/Geriatrics)	22	0	2.0
PHM 714	Clinical Medicine & Pharmacotherapeutics X	33	22	4.0
PHM 715	Clinical Medicine & Pharmacotherapeutics XI	33	22	4.0
PHM 722	Elective III	22	0	2.0
PHM 751	Capstone Project III		22	1.0
PHM 765	Emerging Issues & Practice Readiness Examination	11	22	2
PHM 404	IPE Case conference			0.75
Total		121	88	15.75

Fourth Professional Year Curriculum

The fourth year, also known as the experiential year curriculum lists all the Advanced Pharmacy Practice Experience (APPE) courses. Students will also take APPE electives of their choice. The Case Conferences will consist of reflection sessions that discuss pertinent clinical areas through case studies and will also provide a NAPLEX preparatory course to assess NAPLEX readiness.

Fourth Year Fall Quarter (Aug – Nov)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 801	APPE	0	0	6.0
PHM 802	APPE	0	0	6.0
PHM 810	Case Conferences I*			0.0
Total		0	0	12.0

Fourth Year Winter Quarter (Nov- Feb)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 803	APPE	0	0	6.0
PHM 804	APPE	0	0	6.0
PHM 811	Case Conferences II*			0.0
Total		0	0	12.0

Fourth Year Spring Quarter (Feb- May)

Number	Course Title	Lecture Hours	Lab Hours	Units
PHM 805	APPE	0	0	6.0
PHM 806	APPE	0	0	6.0
PHM 812	Case Conferences III*			0.0
Total		0	0	12.0

Case Conferences*- These are required co-curricular courses focusing on Interprofessional case conferences and patient simulation activities.

Pharm.D. Course Descriptions

DIDACTIC YEARS (P1-P3)

PHM 401 Medical Ethics (1 + 0.5 lab unit) (IPE)

This interprofessional team-taught course introduces ethical theory and presents case studies that are commonplace in clinical professional practice. The lecture sequence that includes scope of practice, ethical theories, state regulations and clinical examples is supplemented with student led discussions on case studies using an interactive learning format. Students examine and address issues by applying ethical theory and values to resolving situations that challenge practitioners. Ethical issues dealing with confidentiality, professional referrals, advertising, record keeping, informed consent, medical mistakes and conflicts of interest are presented in class and discussion groups.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 403 Population and Public Health (2 units) (IPE)

This team-taught interprofessional course is designed to develop a foundational understanding of population and public health and its core functions of assessment, policy development and assurance. This course exposes the student to current trends in the U.S. healthcare system, including healthcare delivery systems and policy, healthcare information systems and healthcare outcomes. In addition the aim is to develop patient communication and educational skills for a culturally diverse patient population to address concepts of health promotion and disease prevention. Evidence-based recommendations for health promotion and disease prevention will be emphasized. Lectures, group activities, workshops, and simulations will be used to discuss and apply the concepts of disease prevention and health promotion.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 404: Interprofessional Case Conferences (0.75 units) (IPE)

This team-taught course introduces interprofessional collaboration, communication and teamwork through small group discussion of clinical cases that are well-suited for all the health professions. Students will examine the clinical cases from their professional perspective and will learn from other health professions students about their professional roles and responsibilities within the context of the case studies. The course is facilitated by an interprofessional team of faculty members who will guide the small group discussions.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 501 Foundations of Human Body and Disease I & Patient Assessment Lab I (2 units + 1 lab unit)

This foundational course is the first in a series designed to develop an understanding of anatomy, pathology physiology, pathophysiology and pharmacological concepts of disease as they pertain to each organ system. Students will also gain knowledge and skills required to elicit, perform, and document a medical history and physical exam with use of appropriate equipment, proper exam techniques, and accurate medical terminology. The student will learn to differentiate between normal physiologic variation and disease states. A blended approach (lecture, small group discussion, multimedia) with an interprofessional laboratory is used for presentation of the material and skills development.

Prerequisites: Admission to the professional Pharmacy program.

PHM 502 Foundations of Human Body and Disease II & Patient Assessment Lab II (2 units + 1 lab unit)

This foundational course is the second in a series designed to develop an understanding of anatomy, pathology physiology, pathophysiology and pharmacological concepts of disease as they pertain to each organ system. Students will also gain knowledge and skills required to elicit, perform, and document a medical history and physical exam with use of appropriate equipment, proper exam techniques, and accurate medical terminology. The student will learn to differentiate between normal physiologic variation and disease states. A blended approach (lecture, small group discussion, multimedia) with an interprofessional laboratory is used for presentation of the material and skills development.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 503 Foundations of Human Body and Disease III & Patient Assessment Lab III (2 units + 1 lab unit)

This foundational course is the third in a series designed to develop an understanding of anatomy, pathology physiology, pathophysiology and pharmacological concepts of disease as they pertain to each organ system. Students will also gain knowledge and skills required to elicit, perform, and document a medical history and physical exam with use of appropriate equipment, proper exam techniques, and accurate medical terminology. The student will learn to differentiate between normal physiologic variation and disease states. A blended approach (lecture, small group discussion, multimedia) with an interprofessional laboratory is used for presentation of the material and skills development.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 510 Integrated Microbiology and Virology (3 units)

This foundational course is designed to introduce the fundamental concepts of microbiology encompassing disease-causing bacteria, viruses, fungi and parasites. Emphasis will also be on understanding host-pathogen interactions in causing human disease, etiology of disease, infection cycle, disease transmission and diagnostic processes. The course will also highlight upon host immune defense mechanisms, pharmaceutical intervention of microbial infections and resistance to such interventions.

Microbial infections by organ system will be discussed and integrated with principles of clinical presentation, prevention and general management through lecture and case studies.

Prerequisites: Admission to the professional Pharmacy program

PHM 511 Integrated Immunology (2 units)

This foundational course is designed to introduce the fundamental concepts of immunology encompassing elements of immune system, antigen processing and antibody generation. Emphasis will be on development of T- and B-lymphocytes, T- and B-cell mediated immunity, host defense mechanisms in response to immediate and induced infections, and their prevention. The course will also highlight upon adaptive immunity, immunological memory, vaccination, autoimmunity and transplantation. Pathological consequences of immunodeficiency and/or autoimmunity will be discussed and integrated with principles of clinical presentation and management.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 520 Pharmaceutical Sciences I: Physical Pharmacy and Dosage Forms (3 units)

This foundational course is the first in a series designed to develop an understanding of the science behind drug dosage forms, delivery and preparation. Materials covered include the selected properties of drug substances that have an impact on the delivery of drugs to the human body, the dosage forms available for drug administration, and the therapeutic effect with respect to physical and chemical properties of drug in solution dispersion and solid state. The course also focuses on the theory, technology, formulation, evaluation and dispensing of aqueous and non-aqueous liquids, disperse systems, semisolids, solids, transdermal, parenteral, ophthalmic, topical and other dosage forms.

Prerequisites: Admission to the professional Pharmacy program.

PHM 521 Pharmaceutical Sciences II: Calculations (2 units + 1.5 lab units)

This foundational course is the third in a series designed to develop an understanding of the science behind drug dosage forms, delivery and preparation. This course includes all aspects of pharmaceutical calculations: Interpretation of prescriptions and medication orders, fundamentals of calculation, dosage and concentration units, detailed calculation of percentages, isotonic solutions, electrolyte solutions, intravenous admixtures and rates of flow. Students are also introduced to calculations related to compounding and dispensing, and patient's parameters such as creatinine clearance in this course.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 522 Pharmaceutical Sciences III: Dosage forms and Compounding (2 units + 2 lab units)

This foundational course is the second in a series designed to develop an understanding of the science behind drug dosage forms, delivery and preparation. Materials covered include the selected properties of drug substances that have an impact on the delivery of drugs to the human body, the dosage forms available for drug administration, and the therapeutic effect with respect to physical and chemical properties of drug in solution. This course includes a laboratory component to enhance development of knowledge and skills.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 530 Pharmaceutical Biochemistry (3 units)

Basic biochemistry as it relates to organ systems, disease and pharmacotherapy is presented and reviewed. This includes the principles of the thermodynamics, kinetics, structure, and regulation of biochemically significant molecules and their building blocks. Biochemical constructs (such as energy production, enzymes, membranes, DNA, RNA, proteins, anabolic and catabolic pathways, etc.) are discussed with respect to pharmaceutical treatment of human disease.

Prerequisites: Admission to the professional Pharmacy program.

PHM 531 Integrated Pharmacology and Medicinal Chemistry I (4 units)

Principles of medicinal chemistry, pharmacology, and toxicology as related to the pharmaceutical sciences including drug discovery and development, functional groups and stereochemistry, acid-base chemistry, ADME/Tox, biotransformation, drug receptors, and ligand-molecular target interactions are covered.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 540 Professional Practice and Healthcare Systems (2 units)

This course is designed to familiarize students with healthcare systems with emphasis on contemporary healthcare issues and pharmacy practice in the United States and services within various medication use systems. The scope of practice and role of the pharmacist in various health settings, historical development of pharmaceutical practice and care, workforce issues, and the economic aspects of pharmacy practice will be discussed. Other topics to be discussed include credentialing, federal and private health insurance, provider privileges, fee-for-service, value-based performance, medication-patient safety and medication therapy management.

Prerequisites: Admission to the professional Pharmacy program

PHM 560 Pharmacy Law (2 units)

This course provides an overview of current state and federal laws that substantially impact the competent delivery of Pharmacy care and services in community, interprofessional, ambulatory/clinic, inpatient, administrative, and other key practice settings. Standards, guidelines, rules, requirements, practices, and policies relating to maintaining/improving patient safety and consumer protection are also provided. The laws and professional practice standards of the state of California are emphasized.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 541 Pharmacy Communications: Management and Leadership (3 units)

The course delineates communication skills for delivery and advocacy of pharmaceutical care, along with principles of management, leadership, teamwork, entrepreneurship, and personal / professional growth.

Students will be introduced to the concepts and principles of interpersonal and healthcare team communication required to optimize patient care needs; along with principles of pharmacy business planning. Other topics include leadership styles, consensus building, assessments of personal skills / talents (e.g., strength-based assessment), and identification of strategies for personal and professional, life-long learning, and effective problem solving (e.g., thinking habits).

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 550 Pharmacy Skills Lab I- Community (1 lab unit)

This course introduces students to the basic activities and skills for community pharmaceutical practice and care. Students will integrate foundational knowledge and skills learned in pharmaceutical and biomedical sciences. Students will learn and practice basic skills utilized in community medication use systems such as prescription fulfillment (e.g., receipt, preparation, labeling, dispensing, and distribution), pharmacy workflow and inventory management, use of pharmacy software, pharmacy abbreviations, pharmacy sig, , therapeutic interchange, medication security with controlled substances, and checking the work of technicians. Students will understand the importance of patient-customer service.

Prerequisites: Admission to the professional Pharmacy program

PHM 551 Pharmacy Skills Lab II- Community (1 lab unit)

This course is a continuation of the Pharmacy Skills Lab series with a focus on community pharmacy practice. Students will integrate foundational knowledge and skills learned in pharmaceutical and biomedical sciences. Students will learn and practice basic skills utilized in community medication use systems such as prescription fulfillment (e.g., receipt, preparation, labeling, dispensing, distribution), use of pharmacy software and automation equipment, and medication errors and safety. Students will also complete training and obtain American Pharmacists Association (APhA) certification in pharmacy-based vaccine immunization delivery and travel health services.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 552 Pharmacy Skills Lab III- Hospital (1 lab unit)

This course introduces students to the basic activities and skills for hospital pharmaceutical practice and care. Students will integrate foundational knowledge and skills learned in pharmaceutical and biomedical sciences. Students will learn and practice basic skills utilized in hospital medication use systems such as medication order fulfillment (e.g., receipt, preparation, labeling, dispensing, distribution), use of pharmacy order entry software and automation equipment, identification and prevention of medication errors, and sterile compounding.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 640 Pharmacy Skills Lab IV- Telehealth/Laboratory Medicine (1 lab unit)

This course centers on utilization of tele-health and laboratory medicine in clinical and pharmaceutical care. The laboratory time is coordinated with initiation of the Clinical Medicine and Pharmacotherapeutics series. Students will be introduced to fundamental laboratory biological tissue testing with emphasis placed on general interpretation of laboratory data, systematic use of laboratory tests in the evaluation and management of common and important clinical conditions and the application of laboratory test results to clinical and pharmaceutical care. Additionally, students have the opportunity to learn and practice basic skills utilized in delivery of contemporary tele-health, drug therapy monitoring, and point-of-care testing.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 641 Pharmacy Skills Lab V- Clinical (1 lab units)

This course allows students to gain additional practice with clinical reasoning, creating a SOAP plan, chart noting, developing patient-care plans and practicing presentation skills that are vital for advanced pharmacy practice experiences. Students begin to evaluate and apply evidence based medical literature to clinical practice.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 730 Pharmacy Skills Lab VI- Clinical (1 lab units)

This course focuses on continued development of skills learned in Pharmacy Skills Lab V with an emphasis on advanced and complicated case studies. Students continue to develop applied medical literature evaluation skills.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 731 Pharmacy Skills Lab VII- Clinical (1 lab units)

This course focuses on continued development of skills learned in Pharmacy Skills Lab VI with an emphasis on advanced and complicated case studies. Students continue to develop applied medical literature evaluation skills.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 580 Pharmaceutical Self Care and Patient Advocacy I (2 units)

This course covers principles of pharmaceutical self-care and the systematic approach for assisting patients who seek both preventive and sickness self-care products for oral conditions, dermatologic, ophthalmic, otic, and respiratory disorders. Students will learn principles to assist, educate and empower patients to take responsibility for, and control of their health. The body systems covered will integrate prior knowledge gained from the Foundations of Human Body and Disease and Patient Assessment Lab.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 650 Pharmaceutical Self Care and Patient Advocacy II (2 units)

This course covers principles of pharmaceutical self-care and the systematic approach for assisting patients who seek both preventive and sickness self-care products for management of chronic diseases states (e.g., asthma, diabetes, dyslipidemia, heart failure, hypertension, osteoporosis), fever, headache, insomnia, drowsiness, fatigue, nutrition, smoking cessation, weight loss; and dietary supplements in self-care, home testing devices, durable medical equipment, supplies required for adult urinary incontinence, ostomy and wound care will also be covered. Students will learn principles to assist, educate, and empower patients to take responsibility for, and control of, their health. The body systems covered will integrate prior knowledge gained from the Foundations of Human Body and Disease and Patient Assessment Lab.

Prerequisites: Successful completion of prior quarter of pharmacy coursework or program permission.

PHM 651 Pharmaceutical Self Care and Patient Advocacy III (2 units)

This course covers principles of pharmaceutical self-care and the systematic approach for assisting patients who seek preventive and sickness self-care products for management of abdominal, gastrointestinal (including ostomy supplies), genitourinary conditions (including incontinence supplies). Acute ailments related to the musculoskeletal. Students will learn principles to assist, educate, and empower patients to take responsibility for, and control of, their health. The body systems covered will integrate prior knowledge gained from the Foundations of Human Body and Disease and Patient Assessment Lab.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 581 Medical Spanish (1 unit)

This course is designed to improve students' communication in clinical situations with Spanish-speaking patients. The focus of the instruction will be on learning basic conversational skills in order to elicit clinical histories, conduct physical examinations, and give instructions to Spanish-speaking patients. Instruction for this course will consist of lectures and class discussion.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 670 Introductory Pharmacy Practice Experience (IPPE) I (4 units)

This course provides introductory community pharmacy practice experience for student pharmacists of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for intern pharmacists, students will further develop, integrate, and apply knowledge from the first curriculum year. Student pharmacists will evaluate prescription and patient information, understand the basic steps for prescription data entry and processing, prescription preparation, actively observe elements of prescription consultations, and understand the basics of medication compliance and errors.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 601 Integrated Pharmacology and Medicinal Chemistry II (3 units)

This course sequence is a comprehensive presentation of medical pharmacology integrated with medicinal chemistry concepts. The general principles of drug disposition including drug absorption, distribution, metabolism, elimination, and pharmacokinetics are covered, as well as the pharmacodynamics of major drug groups. Emphasis is on the mechanism of drug action, clinical uses, adverse effects, contraindications, and clinically important drug interactions. Drugs are presented on a systems basis, and each drug class includes practical clinical correlations.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 602 Integrated Pharmacology and Medicinal Chemistry III (3 units)

This course sequence is a comprehensive presentation of medical pharmacology integrated with medicinal chemistry concepts. The general principles of drug disposition including drug absorption, distribution, metabolism, elimination, and pharmacokinetics are covered, as well as the pharmacodynamics of major drug groups. Emphasis is on the mechanism of drug action, clinical uses, adverse effects, contraindications, and clinically important drug interactions. Drugs are presented on a systems basis, and each drug class includes practical clinical correlations.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 603 Integrated Pharmacology and Medicinal Chemistry IV (3 units)

This course sequence is a comprehensive presentation of medical pharmacology integrated with medicinal chemistry and molecular biology concepts. This course introduces students to important principles of human genetics and molecular biology that apply to contemporary and future pharmaceutical practice. Topics covered include basic concepts in human genetics and genomics, information flow in biological systems, including the structure of DNA, RNA, an overview of state-of-the-art technologies including cloning, recombinant DNA, PCR and microchips. The course includes some classical case studies as well as discussions of ethical challenges in the rapidly growing area of personalized drug therapy based on molecular genetic information.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 610 Drug Information, Informatics and Literature Evaluation (2 units)

This course will provide a systematic approach to drug information and literature evaluation to formulate and implement appropriate drug therapy decisions. This includes effective searching, retrieval, evaluation and dissemination of electronic and print resources. Students will utilize skills learned in this course to effectively communicate and tailor drug information at the appropriate level for providers, other health professionals, caregivers, patients and the public. Emphasis will be placed on the interpretation and application of critical analytical skills to clinical questions. Additionally, this course will provide introductory knowledge on the state-of-the-art in pharmacy informatics and decision support systems needed to implement patient-centered care. Students will be able to define basic terminology used in health informatics and describe the health benefits and current constraints in using information and communication technology in health care. Practical exercises will provide the student with hands-on experience using numerous drug information sources and evaluation techniques.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 620 Research Methodology & Biostatistics (2 units)

This course provides an introduction to basic research methods and biostatistical concepts. Students will learn how to systematically and clinically analyze published biomedical literature for application in evidenced-based medicine. Students will learn how to identify and select appropriate methodologies and statistics for scientific investigations to yield data / results that are generalizable and applicable to clinical medicine. Critical analysis and interpretation of data will also be covered. The biostatistical emphasis will be on understanding the appropriate use in interpretation of the tests, rather than the calculations.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 630 Clinical Medicine and Pharmacotherapeutics I (4 units plus 1 lab unit)

This is the first in a series of courses designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care and recommendations. The series is designed to provide a systematic study of human diseases and disorders by organ system and will include epidemiology, etiology, history, clinical signs and symptom recognition, differential diagnosis, diagnostic criteria, therapeutic management, prevention, and prognosis of disease in clinical medicine. Essentials for the provision of care such as clinical reasoning, evidence-based medicine, guidelines and other tools for clinical decision making are emphasized. Knowledge of pharmacology will be integrated with development of clinical reasoning skills. This first course will discuss the systematic approach to clinical reasoning and decision making including steps to collect and interpret evidence, prioritize, formulate assessments and recommendations, implement, monitor and adjust plans for various disease states. Organ systems covered include renal (including fluid, electrolytes, acid-base) and urology. Additionally, specialized nutrition support, including parenteral and enteral nutrition will be covered. Instruction of this course consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 631 Clinical Medicine and Pharmacotherapeutics II (3 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on the cardiovascular organ system. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 632 Clinical Medicine and Pharmacotherapeutics III (3units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on the cardiovascular, gastrointestinal and hepatic organ systems. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 633 Clinical Medicine and Pharmacotherapeutics IV (4 units plus 1 lab unit).

This course is a continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on the endocrine and pulmonary organ systems. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 634 Clinical Medicine and Pharmacotherapeutics V (4 units plus 1 lab unit)

This course is a continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on musculoskeletal, metabolic and integumentary systems. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered,

pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 710 Clinical Medicine and Pharmacotherapeutics VI (4 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on metabolic disorders as well as disorders of the eyes, ears, nose and throat. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 711 Clinical Medicine and Pharmacotherapeutics VII (4 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on psychiatric medicine. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prere Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 712 Clinical Medicine and Pharmacotherapeutics VIII (3 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on neurologic conditions. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 713 Clinical Medicine and Pharmacotherapeutics IX (3 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on microbiology and infectious diseases. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 714 Clinical Medicine and Pharmacotherapeutics X (3 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on infectious diseases, travel medicine and transplant medicine. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 715 Clinical Medicine and Pharmacotherapeutics XI (3 units plus 1 lab unit)

A continuation of the Clinical Medicine and Pharmacotherapeutics series with a primary focus on oncology medicine. This course is designed to develop knowledge and clinical reasoning skills required for provision of effective and safe patient-centered, pharmacotherapy care. Instruction consists of lecture, case studies, clinical problem sets and structured faculty-led group discussions.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 660 Basic Pharmacokinetics (3 units)

This course presents the basic fundamental principles underlying drug action in the body. Pharmacokinetics describes the relationship of drug dose and the time course of drug presence in the body, including the concepts of drug half-life, steady state concentration, absorption, distribution, metabolism and excretion. Processes that influence the pharmacokinetics of drugs, including formulation, physicochemical, physiological, pharmacological and pathological factors are discussed. Pharmacodynamics presents the effects of drug action at the receptor site and includes the concepts of agonist, antagonist, competitive and non-competitive inhibition, and therapeutic effect. The use of mathematical equations to describe the pharmacokinetic concepts and principles of drug action are introduced and applied to dosage regimen determinations. The course teaches the fundamentals of calculations necessary to determine drug loading dose, maintenance dose, and dosing interval, and prepares the student for Clinical Pharmacokinetics.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 661 Clinical Pharmacokinetics (2 units)

This course expands upon the theoretical concepts explored in Basic Pharmacokinetics. This course focuses on clinical application of pharmacokinetic and pharmacodynamic principles to patient specific pharmacotherapy design, monitoring, and management. The course will review therapeutic drug monitoring and present advanced calculations necessary to determine drug loading dose, maintenance dose, and dosing interval.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 621 Behavioral and Social Science (2 units)

This course will examine how social and behavioral determinates of health may influence individual and group differences in health status. The course will also explore a range of social, ethical, and cultural factors associated with professional practice. This course facilitates the development of greater behavioral and cultural sensitivity that students must acquire to provide pharmaceutical care to patients from diverse populations.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 671 Introductory Pharmacy Practice Experience (IPPE) II (4 units)

This course provides introductory hospital pharmacy practice experience for students of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for intern pharmacists, students will complete the development and ability to integrate and apply knowledge from the didactic curriculum to practice as a licensed pharmacist in the institutional pharmacy practice setting. The student pharmacist will evaluate prescription and patient information, basic steps of prescription, data entry, prescription preparation and labeling, observe prescription consultations, understand the basics of medication compliance and errors in an institutional pharmacy practice setting.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 701 Pharmacoeconomics (2 units)

This course will discuss health economics with an emphasis on evaluating the cost and outcome effects of pharmaceutical product from various perspectives. Several types of pharmacoeconomic analyses (e.g., cost minimization, cost-benefit, cost-effectiveness and cost-utility) will be introduced. Factors underlying the pricing of drugs (development, testing, licensing, manufacturing, marketing, etc.), and translation to healthcare costs. The macro/micro-economics of various aspects of pharmacy practice are discussed, including the impact of such pricing on hospital, retail, and other environments. Students will

learn how to utilize pharmacoeconomic principles to guide optimal healthcare resource allocation, in a standardized and scientific manner.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 740 Biotechnology, Pharmacogenomics and Precision Medicine (3 units)

Precision medicine or personalized medicine is the integration of established clinical–pathological indexes with state-of-the-art molecular profiling to create diagnostic, prognostic, and therapeutic strategies precisely tailored to an individual patient's requirements. This introductory course will discuss the scientific principles of biotechnology, molecular biology and pharmacogenomics pertaining to precision medicine. Topics include bioinformatics, gene therapy, genotyping, molecular biomarkers, nanotechnology, recombinant protein and monoclonal antibody therapeutics and targeted therapy.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 760 Special Populations –Geriatrics/Pediatrics (2 units)

This course will address clinical medicine and pharmacotherapeutic concepts unique to the pediatric, geriatric population and women's health. Emphasis will be on physiology, disease states, pharmacokinetic and pharmacodynamic issues unique to these populations.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 680, 750, 751 Capstone Project I, II, III (0.5, 0.5, and 1 unit each)

An important component of the curriculum is the inclusion of a *culminating experience*. While the practice experience and the culminating experience are often separate requirements, it is possible to integrate the two experiences. In those instances when the practice experience also serves as the culminating experience, it is essential that these assignments be planned and implemented to assure that the student applies skills from across the curriculum and demonstrates synthesis and integration of knowledge. The evaluation of the practice experience takes on special significance when it is also used as the culminating experience, since this may be the sole means by which assessment of the full range of required competencies is achieved. Supervised by college faculty, the capstone project is a culminating experience integrating knowledge, practice, and insights acquired in coursework and other learning experiences during the Doctor of Pharmacy program. The capstone project may include several options, such as the writing of a professional paper, design and implementation of a research project or a service learning project. This is an important component to achieving the outcomes desired for our graduates.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 765 Emerging Issues and Practice Readiness Examination (2 units)

This course is intended to assess the readiness of the students to enter the final year of the curriculum. The course includes multiple small groups, in which each group reads and discusses a variety of topical papers relevant to the scope of pharmacy practice. Students present individually and in teams. A comprehensive exam to assess practice readiness is also administered and is comprised of knowledge and skills from courses completed to date.

Prerequisites: Successful completion of prior quarter coursework or program permission.

PHM 720, 721, 722 Electives I-III (2 units each)

Students select from a list of approved electives. Each elective may be taken once per student. Electives include topics in the following: cardiology, critical care, drug information, geriatrics, infectious disease, pharmacy management, neurology, oncology, ophthalmology, pediatrics, psychiatry, and research methods.

Prerequisites: Successful completion of prior quarter coursework or program permission.

CLINICAL YEAR P4

PHM 801, 802, 803, 804, 805, 806 Advanced Pharmacy Practice Experience (6 units each)

Each student completes six advanced pharmacy practice experiences, each of six weeks duration. These experiences take place in the following practice settings:

- Community Pharmacy
- Hospital or Health System Pharmacy
- Inpatient/Acute Care General Medicine
- Ambulatory Care
- Two Elective Settings

Elective settings include: academia, ambulatory care specialties, compounding, consultant pharmacy, medication therapy management, internal medicine specialties, long-term care, managed care, nuclear medicine, optometric pharmacy, pharmacy administration, pharmaceutical industry, regulatory, research, and specialty pharmacy.

6 x 6-week experiences and 6 h / experience = 36 credits

Prerequisites: Successful completion of prior quarter of coursework or program permission.

PHM 801 Advanced Pharmacy Practice Experience: Community Pharmacy Practice (6 units)

This course provides advanced pharmacy practice experience for students of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for entry-level PharmD candidates, student pharmacists will complete the development and ability to integrate and apply knowledge from the didactic curriculum to practice as a licensed pharmacist in the community pharmacy practice setting.

PHM 802 Advanced Pharmacy Practice Experience: Hospital/Health Care System (6 units)

This course provides advanced pharmacy practice experience for students of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for intern pharmacists, students will complete the development and ability to integrate and apply knowledge from the didactic curriculum to practice as a licensed pharmacist in hospital/ health care system pharmacy practice setting. The student pharmacist will gain experience in practice management, and interactions with other health care providers. The students will develop an understanding of the pathophysiology, complications, pharmacotherapy and non-pharmacotherapy management in various patient populations encountered in a hospital or health care system pharmacy setting.

PHM 803 Advanced Pharmacy Practice Experience: Inpatient/Acute Care General Medicine (6 units)

This course provides advanced pharmacy practice experience for students of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for intern pharmacists, students will complete the development and ability to integrate and apply knowledge from the didactic curriculum to practice as a licensed pharmacist in the general medicine pharmacy practice setting. The student pharmacist will gain experience in practice management, and interactions with other health care providers. The students will develop an understanding of the pathophysiology, complications, pharmacotherapy and non-pharmacotherapy management in various patient populations encountered in the general medicine practice setting.

PHM 804 Advanced Pharmacy Practice Experience: Ambulatory Care Pharmacy Practice (6 units)

This course provides advanced pharmacy practice experience for students of the College of Pharmacy. Under appropriate preceptor supervision and consistent with practice regulations for intern pharmacists, students will complete the development and ability to integrate and apply knowledge from the didactic curriculum to practice as a licensed pharmacist in the ambulatory care pharmacy practice setting. The

student pharmacist will gain experience in practice management, and interactions with other health care providers.

PHM 805 Advanced Pharmacy Practice Experience: Elective Rotation (6 units)

This experiential course provides the opportunity for student pharmacists to select from a list of electives with a variety of non-patient care foci or an additional clinical specialty pharmacy practice experience. Student pharmacists under the supervision of an adjunct faculty or fulltime faculty member will gain experience in their chosen elective area. The student will continue to develop a philosophy of practice, an understanding of the role of the pharmacist as a member of the health care team, and gain knowledge and skills to manage resources and daily operations applicable to the specific elective rotation site.

PHM 806 Advanced Pharmacy Practice Experience: Elective Rotation (6 units)

This experiential course provides the opportunity for student pharmacists to select from a list of electives with a variety of non-patient care foci or an additional clinical specialty pharmacy practice experience. Student pharmacists under the supervision of an adjunct faculty or fulltime faculty member will gain experience in their chosen elective area. The student will continue to develop a philosophy of practice, an understanding of the role of the pharmacist as a member of the health care team, and gain knowledge and skills to manage resources and daily operations applicable to the specific elective rotation site.

PHM 810, 811, 812 Case Conferences I, II, III (0 unit each)

The format and structure of Case Conference Reflections is to provide a forum for the students to apply the knowledge acquired in the didactic curriculum to clinical cases. Interprofessional activities in the Case Conference Reflections help students employ problem solving skills and practice in applying evidence based medicine. The sessions are held during the P4 year at the end of the third week of each six week Advanced (APPE) course and are led by faculty members from the Pharmaceutical Sciences and Pharmacy Practice departments.

The Case Conference sessions are followed by breakout sessions. The sessions are designed to help students practice their communication skills and delivery of information in an organized and concise format. During the breakout sessions students present interventions on acute and chronic patient case experiences, and epidemiological outcomes based on public health focused experiences. All presentations are evaluated and assessed by the faculty facilitators and preceptors present in the session. This course will also serve to record the completion of a NAPLEX preparatory course to assess NAPLEX readiness.

Prerequisites: Successful completion of prior quarter of coursework or program permission.

Attachment 10

APPLICATIONS

Received

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	34	52	37										123
Designated Representatives Vet (EXV)	2	0	2										4
Designated Representatives-3PL (DRL)	7	10	6										23
Intern Pharmacist (INT)	62	564	597										1223
Pharmacist (exam applications)	187	203	217										607
Pharmacist (initial licensing applications)	133	132	686										951
Pharmacy Technician (TCH)	507	576	465										1548
Centralized Hospital Packaging (CHP)	0	0	0										0
Clinics (CLN)	6	7	20										33
Clinics Exempt (CLE)	6	1	14										21
Drug Room (DRM)	0	0	0										0
Drug Room -Temp	0	0	0										0
Drug Room Exempt (DRE)	0	0	0										0
Hospitals (HSP)	1	1	1										3
Hospitals - Temp	1	2	1										4
Hospitals Exempt (HPE)	0	0	0										0
Hypodermic Needle and Syringes (HYP)	2	1	0										3
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	0	0	1										1
Pharmacy (PHY)	44	567	85										696
Pharmacy - Temp	14	540	56										610
Pharmacy Exempt (PHE)	0	1	0										1
Pharmacy Nonresident (NRP)	10	9	14										33
Pharmacy Nonresident Temp	1	1	4										6
Sterile Compounding (LSC)	4	5	8										17
Sterile Compounding - Temp	2	3	2										7
Sterile Compounding Exempt (LSE)	0	0	0										0
Sterile Compounding Nonresident (NSC)	3	2	4										9
Sterile Compounding Nonresident Temp	1	1	1										3
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0										0
Third-Party Logistics Providers (TPL)	1	0	0										1
Third-Party Logistics Providers - Temp	1	0	0										1
Third-Party Logistics Providers Nonresident (NPL)	2	1	1										4
Third-Party Logistics Providers Nonresident Temp	0	0	0										0
Veterinary Food-Animal Drug Retailer (VET)	0	0	0										0
Veterinary Food-Animal Drug Retailer - Temp	0	0	0										0
Wholesalers (WLS)	4	4	11										19
Wholesalers - Temp	1	0	4										5
Wholesalers Exempt (WLE)	0	0	0										0
Wholesalers Nonresident (OSD)	4	10	10										24
Wholesalers Nonresident - Temp	0	0	5										5
Total	1040	2693	2252	0	0	0	0	0	0	0	0	0	5985

All change of location applications are reported under the license type as a new license is issued effective 11/1/2014

APPLICATIONS (continued)													
Issued													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	25	26	30										81
Designated Representatives Vet (EXV)	0	3	0										3
Designated Representatives-3PL (DRL)	6	13	8										27
Intern Pharmacist (INT)	100	389	327										816
Pharmacist (initial licensing applications)	17	244	291										552
Pharmacy Technician (TCH)	453	672	490										1615
Centralized Hospital Packaging (CHP)	2	0	0										2
Clinics (CLN)	26	12	10										48
Clinics Exempt (CLE)	0	3	2										5
Drug Room (DRM)	0	0	0										0
Drug Room-Temp	0	0	0										0
Drug Room Exempt (DRE)	0	0	0										0
Hospitals (HSP)	1	2	2										5
Hospitals - Temp	0	5	2										7
Hospitals Exempt (HPE)	1	1	0										2
Hypodermic Needle and Syringes (HYP)	1	2	0										3
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	0	0	0										0
Pharmacy (PHY)	24	27	36										87
Pharmacy - Temp	4	12	6										22
Pharmacy Exempt (PHE)	2	0	0										2
Pharmacy Nonresident (NRP)	5	3	5										13
Pharmacy Nonresident Temp	1	1	0										2
Sterile Compounding (LSC)	4	6	3										13
Sterile Compounding - Temp	0	7	5										12
Sterile Compounding Exempt (LSE)	2	0	0										2
Sterile Compounding Nonresident (NSC)	4	3	0										7
Sterile Compounding Nonresident Temp	0	1	1										2
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0										0
Third-Party Logistics Providers (TPL)	0	0	0										0
Third-Party Logistics Providers-Temp	0	0	0										0
Third-Party Logistics Providers Nonresident (NPL)	1	0	0										1
Third-Party Logistics Providers Nonresident Temp	0	0	0										0
Veterinary Food-Animal Drug Retailer (VET)	0	1	0										1
Veterinary Food-Animal Drug Retailer - Temp	0	0	0										0
Wholesalers (WLS)	3	5	4										12
Wholesalers - Temp	0	0	0										0
Wholesalers Exempt (WLE)	0	0	0										0
Wholesalers Nonresident (OSD)	5	9	1										15
Wholesalers Nonresident - Temp	0	0	0										0
Total	687	1447	1223	0	0	0	0	0	0	0	0	0	3357

APPLICATIONS (continued)

Pending	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN
Designated Representatives (EXC)	247	258	263									
Designated Representatives Vet (EXV)	6	1	3									
Designated Representatives-3PL (DRL)	100	94	90									
Intern Pharmacist (INT)	156	218	557									
Pharmacist (exam applications)	1253	1169	1292									
Pharmacist (eligible exam(Status A))	2107	2061	1713									
Pharmacy Technician (TCH)	1574	1378	1417									
Centralized Hospital Packaging (CHP)	6	6	6									
Clinics (CLN)	73	66	70									
Clinics Exempt (CLE)	21	20	28									
Drug Room (DRM)	4	4	4									
Drug Room Exempt (DRE)	0	0	0									
Hospitals (HSP)	16	8	5									
Hospitals Exempt (HPE)	1	0	0									
Hypodermic Needle and Syringes (HYP)	11	6	6									
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0									
Correctional Pharmacy (LCF)	1	1	2									
Pharmacy (PHY)	171	693	728									
Pharmacy Exempt (PHE)	4	5	5									
Pharmacy Nonresident (NRP)	120	128	135									
Sterile Compounding (LSC)	43	33	31									
Sterile Compounding - Exempt (LSE)	4	4	4									
Sterile Compounding Nonresident (NSC)	35	32	31									
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0									
Third-Party Logistics Providers (TPL)	11	12	12									
Third-Party Logistics Providers Nonresident (NPL)	42	41	42									
Veterinary Food-Animal Drug Retailer (VET)	2	1	1									
Wholesalers (WLS)	71	70	76									
Wholesalers Exempt (WLE)	0	0	0									
Wholesalers Nonresident (OSD)	118	119	127									
Total	6197	6428	6648	0	0	0	0	0	0	0	0	0

The number of temporary applications are included in the primary license type.

APPLICATIONS (continued)													
Withdrawn													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	6	8	1										15
Designated Representatives Vet (EXV)	0	1	0										1
Designated Representatives-3PL (DRL)	1	1	1										3
Intern Pharmacist (INT)	0	0	1										1
Pharmacist (exam applications)	0	0	0										0
Pharmacist (initial licensing applications)	0	0	0										0
Pharmacy Technician (TCH)	14	3	6										23
Centralized Hospital Packaging (CHP)	0	0	0										0
Clinics (CLN)	0	0	3										3
Clinics Exempt (CLE)	0	0	0										0
Drug Room (DRM)	0	0	0										0
Drug Room Exempt (DRE)	0	0	0										0
Hospitals (HSP)	2	2	0										4
Hospitals Exempt (HPE)	0	0	0										0
Hypodermic Needle and Syringes (HYP)	0	4	0										4
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	0	0	0										0
Pharmacy (PHY)	4	6	4										14
Pharmacy Exempt (PHE)	1	0	0										1
Pharmacy Nonresident (NRP)	1	1	1										3
Sterile Compounding (LSC)	0	2	0										2
Sterile Compounding Exempt (LSE)	0	0	0										0
Sterile Compounding Nonresident (NSC)	0	0	3										3
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0										0
Third-Party Logistics Providers (TPL)	0	0	0										0
Third-Party Logistics Providers Nonresident (NPL)	0	2	1										3
Veterinary Food-Animal Drug Retailer (VET)	0	0	0										0
Wholesalers (WLS)	1	0	0										1
Wholesalers Exempt (WLE)	0	0	0										0
Wholesalers Nonresident (OSD)	1	1	0										2
Total	31	31	21	0	0	0	0	0	0	0	0	0	83
The number of temporary applications withdrawn is reflected in the primary license type.													

APPLICATIONS (continued)													
Denied													
	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	0	0	0										0
Designated Representatives Vet (EXV)	0	0	0										0
Designated Representatives-3PL (DRL)	0	0	0										0
Intern Pharmacist (INT)	0	0	0										0
Pharmacist (exam applications)	1	0	1										2
Pharmacist (initial licensing applications)	0	0	0										0
Pharmacy Technician (TCH)	1	2	2										5
Centralized Hospital Packaging (CHP)	0	0	0										0
Clinics (CLN)	0	0	0										0
Clinics Exempt (CLE)	0	0	0										0
Drug Room (DRM)	0	0	0										0
Drug Room Exempt (DRE)	0	0	0										0
Hospitals (HSP)	0	0	0										0
Hospitals Exempt (HPE)	0	0	0										0
Hypodermic Needle and Syringes (HYP)	0	0	0										0
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	0	0	0										0
Pharmacy (PHY)	1	0	0										1
Pharmacy Exempt (PHE)	0	0	0										0
Pharmacy Nonresident (NRP)	0	0	1										1
Sterile Compounding (LSC)	0	0	0										0
Sterile Compounding Exempt (LSE)	0	0	0										0
Sterile Compounding Nonresident (NSC)	0	0	1										1
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0										0
Third-Party Logistics Providers (TPL)	0	0	0										0
Third-Party Logistics Providers Nonresident (NPL)	0	0	0										0
Veterinary Food-Animal Drug Retailer (VET)	0	0	0										0
Wholesalers (WLS)	0	0	0										0
Wholesalers Exempt (WLE)	0	0	0										0
Wholesalers Nonresident (OSD)	0	0	0										0
Total	3	2	5	0	0	0	0	0	0	0	0	0	10

RESPOND TO STATUS REQUESTS

A. Email Inquiries	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Pharmacist/Intern Received	566	675	691										1932
Pharmacist/Intern Responded	402	508	515										1425
Pharmacy Technician Received	421	433	482										1336
Pharmacy Technician Responded	441	529	535										1505
Pharmacy Received	575	516	760										1851
Pharmacy Responded	555	517	709										1781
Sterile Compounding Received	334	499	401										1234
Sterile Compounding Responded	312	427	341										1080
Wholesale/Clinic/Hypodermic/3PL Received	538	619	355										1512
Wholesale/Clinic/Hypodermic/3PL Responded	479	446	446										1371
Pharmacist-in-Charge Received	135	209	191										535
Pharmacist-in-Charge Responded	94	113	130										337
Change of Permit Received	364	251	411										1026
Change of Permit Responded	321	218	258										797
Renewals Received	293	297	349										939
Renewals Responded	227	261	291										779

B. Telephone Calls Received	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Pharmacist/Intern	109	128	50										287
Pharmacy	89	100	135										324
Sterile Compounding	74	54	63										191
Wholesale/Clinic/Hypodermic/3PL	75	103	117										295
Pharmacist-in-Charge	70	90	86										246
Change of Permit	63	46	70										179
Renewals	565	591	647										1803

UPDATE LICENSING RECORDS

A. Change of Pharmacist-in-Charge	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Received	175	194	199										568
Processed	235	190	208										633
Approved	242	189	195										626
Pending	231	240	238										231

B. Change of Desig. Representative-in-Charge	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Received	17	14	19										50
Processed	17	12	22										51
Approved	17	9	21										47
Pending	19	28	28										19

C. Change of Responsible Manager	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Received	3	0	1										4
Processed	1	3	0										4
Approved	0	1	0										1
Pending	7	4	5										7

D. Change of Permits	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Received	122	150	86										358
Processed	192	40	115										347
Approved	138	57	225										420
Pending	844	892	752										844

E. Discontinuance of Business	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Received	22	32	28										82
Processed	35	24	37										96
Approved	39	17	47										103
Pending	86	91	85										86

F. Requests Approved	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Address/Name Changes	1154	1247	975										3376
Off-site Storage		41											41
Transfer of Intern Hours	0	19	3										22
License Verification	158	83	134										375

Revenue Received

(Revenue available through August 2016)

A. Revenue Received

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Applications	139,305	288,693											\$427,998
Renewals	679,896	1,674,124											\$2,354,020
Cite and Fine	84,702	67,793											\$152,495
Probation/Cost Recovery	50,102	28,646											\$78,748
Request for Information/Lic. Verification	2,330	1,770											\$4,100
Fingerprint Fee	4,704	7,514											\$12,218

B. Licenses Renewed

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	166	266	171										603
Designated Representatives Vet (EXV)	5	7	5										17
Designated Representatives-3PL (DRL)	13	18	26										57
Pharmacist (RPH)	1565	1988	1735										5,288
Pharmacy Technician (TCH)	2533	3080	2381										7,994

Centralized Hospital Packaging (CHP)	0	0	0										0
Clinics (CLN)	67	101	70										238
Clinics Exempt (CLE)	2	1	90										93
Drug Room (DRM)	4	1	2										7
Drug Room Exempt (DRE)	0	0	6										6
Hospitals (HSP)	17	23	23										63
Hospitals Exempt (HPE)	0	3	49										52
Hypodermic Needle and Syringes (HYP)	12	31	20										63
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	0	1	33										34
Pharmacy (PHY)	182	287	693										1,162
Pharmacy Exempt (PHE)	0	0	80										80
Pharmacy Nonresident (NRP)	26	30	40										96
Sterile Compounding (LSC)	51	39	46										136
Sterile Compounding Exempt (LSE)	0	4	1										5
Sterile Compounding Nonresident (NSC)	5	4	4										13
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0										0
Third-Party Logistics Providers (TPL)	4	0	5										9
Third-Party Logistics Providers Nonresident (NPL)	4	6	8										18
Veterinary Food-Animal Drug Retailer (VET)	0	1	2										3
Wholesalers (WLS)	50	51	27										128
Wholesalers Exempt (WLE)	0	1	5										6
Wholesalers Nonresident (OSD)	46	53	52										151
Total	4752	5996	5574	0	0	0	0	0	0	0	0	0	16322

Current Licensees

	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	FYTD
Designated Representatives (EXC)	3008	3040	3062										3062
Designated Representatives Vet (EXV)	63	66	66										66
Designated Representatives-3PL (DRL)	204	221	25										25
Intern Pharmacist (INT)	6377	6607	6625										6625
Pharmacist (RPH)	43802	43974	44167										44167
Pharmacy Technician (TCH)	73277	73318	73173										73173
Centralized Hospital Packaging (CHP)	8	8	8										8
Clinics (CLN)	1101	1102	1102										1102
Clinics Exempt (CLE)	237	236	237										237
Drug Room (DRM)	23	23	23										23
Drug Room Exempt (DRE)	13	13	12										12
Hospitals (HSP)	396	395	397										397
Hospitals Exempt (HPE)	86	87	87										87
Hypodermic Needle and Syringes (HYP)	286	287	287										287
Hypodermic Needle and Syringes Exempt (HYE)	0	0	0										0
Correctional Pharmacy (LCF)	55	55	55										55
Pharmacy (PHY)	6442	6444	6442										6442
Pharmacy Exempt (PHE)	124	124	124										124
Pharmacy Nonresident (NRP)	508	510	511										511
Sterile Compounding (LSC)	788	787	786										786
Sterile Compounding Exempt (LSE)	121	121	121										121
Sterile Compounding Nonresident (NSC)	95	93	93										93
Surplus Medication Collection Distribution Intermediary (SME)	1	1	1										1
Third-Party Logistics Providers (TPL)	16	16	16										16
Third-Party Logistics Providers Nonresident (NPL)	61	61	61										61
Veterinary Food-Animal Drug Retailer (VET)	23	23	23										23
Wholesalers (WLS)	556	553	553										553
Wholesalers Exempt (WLE)	16	16	16										16
Wholesalers Nonresident (OSD)	731	734	726										726
Total	138418	138915	138799	0	0	0	0	0	0	0	0	0	138799

Attachment 11



California State Board of Pharmacy

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BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY

DEPARTMENT OF CONSUMER AFFAIRS

GOVERNOR EDMUND G. BROWN JR.

**STATE BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
LICENSING COMMITTEE MEETING
MINUTES**

DATE: September 27, 2016

LOCATION: Department of Consumer Affairs
First Floor Hearing Room
1747 North Market Blvd
Sacramento, CA 95834

COMMITTEE MEMBERS PRESENT: Stanley Weisser, Chairperson
Debbie Veale, Vice-Chairperson
Albert Wong, Licensee Member
Lavanza Butler, Licensee Member

COMMITTEE MEMBERS

NOT PRESENT: Ricardo Sanchez, Public Member

STAFF MEMBERS PRESENT: Virginia Herold, Executive Officer
Anne Sodergren, Assistant Executive Officer
Laura Freedman, DCA Staff Counsel

Note: To accommodate presenters' schedules, the committee took agenda items out of order. For ease of use, the minutes reflect the discussion of the committee in the order the items were included on the agenda.

1. Call to Order and Establishment of Quorum

Chairperson Weisser called the meeting to order at 9:08 a.m. Roll call was taken with the following members present: Lavanza Butler, Stan Weisser, Debbie Veale and Albert Wong.

2. Public Comment for Items Not on the Agenda, Matters for Future Meetings

A representative from the California Society of Health Systems Pharmacists (CSHP) expressed concerns with testing date availability for the CPJE and indicated that they believe the exam is getting more difficult. In addition public comment requested that the committee discuss the 90-day waiting periods for the NAPLEX and CPJE and expressed concern about how the waiting period can impact an individual's residency.

3. Discussion on Implementation of Provisions Contained in Senate Bill 1193

Chairperson Weisser advised the committee that Senate Bill 1193 was recently signed by the Governor. Mr. Weisser noted that the bill provides for an extension of the board's sunset date as well as includes many important changes to pharmacy law. Chair Weisser advised the committee of three areas of pharmacy law impacted by this measure that impact application and/or licensure requirements.

a. Incorporate Trusts as an Entity Authorized of Obtain Licensure

Chair Weisser reminded the committee that for several meetings, the committee discussed the issue of trust ownership, primarily related to pharmacy ownership structures and more recently during the July 2016 Board Meeting, the board approved statutory changes as the first step to allowing such ownership. Chair Weisser referred the committee to the proposed regulation language.

Matthew Heyn with the Office of the Attorney General providing an overview of the proposal. Mr. Heyn indicated that the proposal is intended to provide the board with information to determine who owns and who controls a trust. He noted that the board needs this information to understand the ownership and control of the trust. Mr. Heyn also explained why the regulation includes an age restriction related to the disclosure as well as the need for various individuals involved in the trust to be disclosed.

Mr. Heyn indicated that if assets are transferred upon death, a change of ownership would be required, however if the trust currently owns the pharmacy, then the death would not result in a change of ownership because there is no change in the ownership or control of the pharmacy.

The committee discussed the proposal and noted that some of the proposed changes were not related specifically to the implementation of the trust ownership. Further, public comment expressed concern with the changes related to reporting changes in officers and administrators.

Motion: Recommend approval of the proposed regulation change to CCR section 1709 that include the provisions relating to the trust ownership as well as formatting changes. Remove provisions that are not related to the trust ownership.

To Amend Article 2 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

§1709.

(a) Each ~~permit~~ license to operate a pharmacy shall ~~display~~ show the name and address of the pharmacy, the form of ownership (individual, partnership or corporation) and the pharmacist-in-charge. Each pharmacy shall, in its initial application on the annual renewal form, report the name of the pharmacist in charge, the names of all owners and the names of the corporate officers (if a corporation). Any changes in the pharmacist-in-charge, or the owners, or corporate officers shall be reported to the Board within 30 days.

(b) Each pharmacy, in its initial application and on the annual renewal form, shall report the name of the pharmacist-in-charge, and the name of each owner, manager, administrator, member, officer, director, associate, partner, or any other person in any position with management or control of the pharmacy. Any changes in the pharmacist-in-charge, or in the owner, manager, administrator, member, officer, director, associate, partner, or in any other position with management or control of the pharmacy, shall be reported to the board within 30 days.

(b) (c) Any transfer, in a single transaction or in a series of transactions, of 10 percent or more of the beneficial interest in a business entity licensed by the board to a person or entity who did not hold a beneficial interest at the time the original permit was issued, shall require written notification to the board within 30 days.

(c) (d) A license issued by the board shall not be transferred from one owner to another. The following shall constitute a transfer of permit and require application for a change of ownership of a business entity licensed by the board: any transfer in a single transaction or in a series of transactions of a 50 percent or more of the beneficial interest in a business entity licensed by the board a business entity licensed by the board, in a single transaction or in a series of transactions, to any person or persons that did not hold a beneficial interest at the time the original permit was issued, which results in the transferee's holding 50% or more of the beneficial interest in that license. A change of ownership application shall be filed with the board in advance of the proposed transaction taking place.

(e) The board may issue a license to an entity that is controlled by a revocable or irrevocable trust.

(f) Where an applicant for an entity is controlled by a trust, the applicant shall disclose the full name of the trust, and shall provide to the board a complete copy of and any amendments to the trust document. A trust document and any related amendments shall not be subject to disclosure by the board.

(g) The applicant shall disclose at application and at each renewal the name, address and contact information for each grantor, settlor, trustee, trust protector, as applicable, all of which shall be subject to approval by the board. In addition, the applicant shall disclose the name, address and contact information for each beneficiary named in the trust that is age 18 or greater, which shall be subject to approval by the board.

(h) The trustee or trust protector or any other position with management or control of the pharmacy, shall notify the board within 30 days of any change to the trustee or trust protector. A new trustee or trust protector shall be subject to the approval of the board.

(i) The trustee or trust protector or any other position with management or control of the pharmacy, shall notify the board within 30 days of any change in beneficiaries of the trust, where the beneficiary is age 18 or older. Each new beneficiary age 18 or older shall be subject to the approval of the board.

(j) Where a license is held or controlled by a revocable trust, the trustee or trust protector or any other position with management or control of the pharmacy, shall notify the board within 30 days of the trust being revoked.

(k) Where a license is held or controlled by an irrevocable trust, the trustee or trust protector or any other position with management or control of the pharmacy, shall notify the board within 30 days of the trust being dissolved.

(l) The trustee or trust protector or any other position with management or control of the pharmacy, shall provide to the board within 30 days any amendment(s) to the trust document not provided with the original application.

(m) A trust that has a beneficiary or trustee or any person that is prohibited from management or control of a license issued by the board shall not hold a pharmacy license nor possess a material beneficial interest in a business entity licensed by the board.

M/S: Veale/Butler

Support: 4 Oppose: 0 Abstain: 0

b. Licensure of Outsourcing Facilities

Chair Weisser advised the committee that under federal law an outsourcing facility is a facility that compounds human drugs under specified conditions. Mr. Weisser noted that the FDA's regulation of an outsourcing facility will be done according to compliance with good manufacturing practice requirements and the other requirements of Section 503B.

The committee discussed the provisions in SB 1193 which establish the board's ability to regulate outsourcing facilities that provide compounded medications in California. As part of the discussion, the committee noted that similar to the board's regulation of sterile compounding pharmacies, outsourcing facilities will be inspected by the board prior to issuance of a license as well as prior to renewal.

The committee was advised of implementation efforts underway including working with the department's information systems to secure changes to the computer system as well as an interim workaround system that will be manual process.

c. E-mail Notification List Requirement

Chair Weisser indicated that for many years the board has used an email subscriber alert system as a quick and efficient way to communicate with licensees. Chair Weisser referenced the Business and Professions Code section 4013 which establishes the requirement for businesses licensed by the board to join the board's email notification list within 60 days of obtaining a license or at the time of renewal.

The committee discussed similar provisions in SB 1193 that will impact pharmacists, interns, pharmacy technicians and designated representative-3PLs. The committee discussed efforts underway to implement the new requirements.

As part of the discussion, the committee was advised of a drafting error with the provisions in SB 1193 in that the designated representative license category was inadvertently not included. As part of its discussion, the committee discussed the need

to secure a statutory change to remedy the drafting error and proposed language that could be used to facilitate the change.

MOTION: Recommend approval of the proposed statutory change to amend section 4013 to include designated representatives in the list of individuals required to join the email notification.

Section 4013 of the Business and Professions Code is amended to read:

(a) Any facility licensed by the board shall join the board's email notification list within 60 days of obtaining a license or at the time of license renewal.

(b) Any facility licensed by the board shall update its email address with the board's email notification list within 30 days of a change in the facility's email address.

(c) An owner of two or more facilities licensed by the board may comply with subdivisions (a) and (b) by subscribing a single email address to the board's email notification list, where the owner maintains an electronic notice system within all of its licensed facilities that, upon receipt of an email notification from the board, immediately transmits electronic notice of the same notification to all of its licensed facilities. If an owner chooses to comply with this section by using such an electronic notice system, the owner shall register the electronic notice system with the board by July 1, 2011, or within 60 days of initial licensure, whichever is later, informing the board of the single email address to be utilized by the owner, describing the electronic notice system, and listing all facilities to which immediate notice will be provided. The owner shall update its email address with the board's email notification list within 30 days of any change in the owner's email address.

(d) (1) Each pharmacist, intern pharmacist, pharmacy technician, designated representative, designated representative-3PL licensed in this state shall join the board's email notification list within 60 days of obtaining a license or at the time of license renewal.

(2) Each pharmacist, intern pharmacist, pharmacy technician, designated representative, and designated representative-3PL licensed in this state shall update his or her email address with the board's email notification list within 30 days of a change in the licensee's email address.

(3) The email address provided by a licensee shall not be posted on the board's online license verification system.

(4) The board shall, with each renewal application, remind licensees of their obligation to report and keep current their email address with the board's email notification list.

(5) *This subdivision shall become operative on July 1, 2017.*

M/S: Veale/ Wong

Support: 4 Oppose: 0 Abstain: 0

4. Discussion and Consideration of Possible Revisions to the Board's Fee Schedule (Title 16 CCR §1749) to Implement the Provisions Contained in Senate Bill 1039

Chair Weisser reminded the committee that the board has been discussing its budget and the structural imbalance between its authorized expenditures exceeding its revenue. To address this issue the board worked with the Department of Consumer Affairs on a fee analysis, where the department determined the cost the board incurs to provide various services. Mr. Weisser noted that the results of this analysis were included in the board's Sunset Report. Mr. Weisser noted that the results of the fee analysis were also the basis for the new fee structure included in Senate Bill 1039 which was awaiting action by the Governor. The committee was advised that, if approved, the new fees will take effect July 1, 2017.

The committee discussed the need to pursue a regulation change to provide the board's regulated public with a clear understanding of the fees that will be assessed for the various services, including application and renewal as well as delinquent fees.

Dr. Wong suggested that the board should offer more free continuing education on prescription drug abuse with the Drug Enforcement Administration and offer such education in different locations as a way to give back to its licensees.

Dr. Gray requested information on how the renewal fees were established and was advised renewal fees were based on the fee analysis prepared by the DCA.

The committee reviewed a regulation proposal to amend Title 16 CCR 1749 with the goal to have the regulation change in effect by July 1, 2017, to avoid confusion for the regulated public.

Motion: Assuming the Governor signs SB 1039, approve the draft regulation proposal to amend 16 CCR section 1749. (language below)

Proposal to Amend California Code of Regulations Section 1749 Fee Schedule

The fees for the issuance and renewal of licenses, certificates, and permits, and the penalties to be assessed for failure to renew in accordance with sections 163.5, 4110, 4127.5, 4128.2, 4196, and 4400 of the Business and Professions Code are hereby fixed as follows:

(a) The fee for the issuance of a pharmacy license is five hundred twenty dollars (\$520). The fee for the annual renewal of pharmacy license is ~~three hundred twenty-five dollars (\$325)~~ six hundred sixty five dollars (\$665). The penalty for failure to renew is one hundred fifty dollars (\$150).

(b) The fee for the issuance of a temporary license is three hundred twenty-five dollars

(\$325).

(c) The fee for the issuance of a pharmacy technician license shall be ~~one hundred five dollars (\$105)~~ one hundred and forty dollars (\$140). The fee for the biennial renewal of a pharmacy technician license shall be ~~one hundred thirty dollars (\$130)~~ one hundred forty dollars (\$140). The penalty for failure to renew a pharmacy technician license is ~~sixty-five dollars (\$65)~~ seventy dollars (\$70).

(d) The fee for application and examination as a pharmacist is two hundred sixty dollars (\$260).

(e) The fee for regrading an examination is one hundred fifteen dollars (\$115).

(f)(1) The fee for the issuance of an original pharmacist license is one hundred ninety-five dollars (\$195).

(2) The fee for application of an advanced practice pharmacist license is three hundred dollars (\$300). If granted, there is no fee for the initial license issued, which will expire at the same time the pharmacist's license expires.

(g) (1) The fee for the biennial renewal of a pharmacist's license is ~~one hundred ninety-five dollars (\$195)~~ three hundred sixty dollars (\$360). The penalty fee for failure to renew is ~~ninety-seven dollars fifty cents (\$97.50)~~ one hundred fifty dollars (\$150).

(2) The fee for the biennial renewal of an advanced practice pharmacist license is three hundred dollars (\$300). The penalty fee for failure to renew is one hundred fifty dollars (\$150).

(h) The fee for the issuance or renewal of a wholesaler's license or third-party logistics provider is seven hundred eighty dollars (\$780). The penalty for failure to renew is one hundred fifty dollars (\$150). The fees in this paragraph are in addition to the fees required to renew the pharmacist's license as specified in paragraph 1.

(i) The fee for the issuance ~~or renewal~~ of a hypodermic license is ~~one hundred sixty-five dollars (\$165)~~ one hundred seventy dollars (\$170). The fee for the annual renewal of a hypodermic needle license is two hundred dollars (\$200). The penalty for failure to renew is ~~eighty-two dollars fifty cents (\$82.50)~~ one hundred dollars (\$100).

(j) The fee for the issuance of a license as a designated representative pursuant to Section 4053 of the Business and Professions Code or designated representative-3PL pursuant to Section 4053.1 ~~shall be three hundred thirty dollars (\$330)~~ is one hundred fifty dollars (\$150). The fee for the annual renewal of a license as a designated representative shall be ~~one hundred ninety-five dollars (\$195)~~ two hundred and fifteen dollars (\$215). The penalty for failure to renew is ~~ninety-seven dollars and fifty cents (\$97.50)~~ one hundred seven dollars and fifty cents (\$107.50).

(k) The fee for the issuance or renewal of a license as a nonresident wholesaler or nonresident third-party logistics provider is seven hundred eighty dollars (\$780). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is five hundred dollars (\$550).

(l) The fee for an intern pharmacist license is ~~one hundred fifteen dollars (\$115)~~ one hundred sixty-five dollars (\$165). The fee for transfer of intern hours or verification of licensure to another state is thirty dollars (\$30).

(m) The fee for the reissuance of any permit, license, or certificate, or renewal thereof, which must be reissued because of change in the information, other than name change, is one hundred dollars (\$100).

(n) The fee for the reissuance of any license that has been lost or destroyed or

reissued due to a name change is forty-five dollars (\$45)

~~(n)~~ (o) The fee for evaluation of continuing education courses for accreditation is forty dollars (\$40) for each hour of accreditation requested.

~~(o)~~ (p) The fee for the issuance of a clinic license is five hundred twenty dollars (\$520). The fee for the annual renewal of a clinic license is three hundred twenty-five dollars (\$325). The penalty for failure to renew is one hundred fifty dollars (\$150).

~~(p)~~ (q) The fee for the issuance of a nongovernmental license, ~~or renewal of a license,~~ to compound sterile drug products is ~~seven hundred eighty dollars (\$780)~~ one thousand six hundred forty-five dollars (\$1645). The fee for the annual renewal of a nongovernmental license to compound sterile drug products is one thousand three hundred twenty-five dollars (\$1,325). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is five hundred dollars (\$550).

(r) The fee for the issuance of a nonresident sterile compounding pharmacy is two thousand three hundred eighty dollars (\$2,380). The fee for the annual renewal of nonresident sterile compounding pharmacy license is two thousand two hundred seventy dollars (\$2,270). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary license is five hundred dollars (\$550).

~~(q)~~ (s) The fee for the issuance of a license as a designated representative for a veterinary food-animal drug retailer ~~shall be three hundred thirty dollars (\$330)~~ is one hundred fifty dollars (\$150). The fee for the annual renewal of a license as a designated representative ~~shall be one hundred and ninety-five dollars (\$195)~~ is two hundred fifteen dollars (\$215). The penalty for failure to renew is ~~ninety-seven dollars and fifty cents (\$97.50)~~ is one hundred seven dollars and fifty cents (\$107.50).

~~(r)~~ (t) The fee for a veterinary food-animal drug retailer license is ~~four hundred twenty-five dollars (\$425)~~ four hundred and thirty-five dollars (\$435). The annual renewal fee for a veterinary food-animal drug retailer is ~~three hundred twenty-five dollars (\$325)~~ three hundred thirty dollars (\$330). The fee for the issuance of a temporary license is two hundred and fifty dollars (\$250). The penalty for failure to renew is ~~one hundred twenty-five dollars (\$125)~~ one hundred fifty dollars (\$150).

~~(s)~~ (u) The fee for the issuance of a retired pharmacist license shall be forty-five dollars (\$45).

~~(t)~~ (v) The fee for the issuance of a centralized hospital packaging pharmacy license ~~shall be \$800~~ is eight hundred twenty dollars (\$820). The annual renewal fee for a centralized hospital packaging pharmacy license ~~shall be \$800~~ is eight hundred five dollars (\$805). The penalty for failure to renew is one hundred fifty dollars.

(w) The fee for the issuance of an outsourcing facility license is two thousand two hundred seventy dollars (\$2,270). The annual renewal fee for an outsourcing facility is one thousand three hundred twenty-five dollars (\$1,325). The penalty for failure to renew is one hundred fifty dollars (\$150). The fee for a temporary outsourcing facility license is seven hundred fifteen dollars (\$715).

(x) The fee for the issuance of a nonresident outsourcing facility license is two thousand three hundred eighty dollars (\$2,380). The annual renewal fee for a nonresident outsourcing facility is two thousand two hundred seventy dollars (\$2,270). The penalty for failure to renew is one hundred fifty dollars (\$150).

Note: Authority cited: Sections 163.5 and 4005, Business and Professions Code.

Reference: Sections 163.5, 4005, 4053, 4053.1, 4110, 4112(h), 4120, 4128.2, 4129.1,

M/S: Veale/Butler

Support: 4 Oppose: 0 Abstain: 0

5. Discussion and Consideration of Next Steps Necessary to Implement Senate Bill 952 Relating to Pharmacy Technician Licensure Requirements (SB 952, Chapter 150, Statutes of 2016)

Chair Weisser referenced Business and Professions Code section 4202 noting that it provides the general pathways to licensure as a pharmacy technician and that Senate Bill 952 modified the requirements to expand the certification requirement to include other agencies. Chair Weisser indicated that because of the language in the measure, the board is required to approve certification programs.

Chair Weisser reminded the committee of prior presentations on two certification programs, one offered by the Pharmacy Technician Certification Board (PTCB) and a second one offered by the National Healthcare Association (NHA) and noted that as part of its March 2016 committee meeting, the committee compared the two certification programs. During these presentations the committee was advised that both certification programs are accredited by the National Commission for Certifying Agencies.

Chair Weisser indicated that to facilitate implementation of this new provision the committee should consider a regulation that identifies which certification programs are approved by the board. Chair Weisser stated that in the interim the committee needs to determine how or if it wishes to approve such programs in advance of the regulation.

The committee discussed the regulation language as well as the need to include an expiration date of the board's approval. The committee noted that the expiration date would allow the board the opportunity to reevaluate programs, which seems appropriate given both the committee as well as the board's consideration of possible changes to the pharmacy technician program in California. Counsel offered suggestions to include an expiration date as part of the proposed regulation text.

As part of the public comment provided, the committee was advised of a drafting error in the proposed regulation language related to the reference to the NHA program.

Motion: Recommend to the board approval of the proposed language with an amendment to include an expiration date of January 1, 2021 and an amendment to correct the name of the NHA program. (language below)

Proposal to Add Section 1793.65

1793.65 Certification Programs Specified by the Board.

Pursuant to Business and Professions Code Section 4202(a)(4), the board approves the following

pharmacy technician certification programs:

a. *Pharmacy Technician Certification Board*

b. *National Healthcareer Association Pharmacy Technician Certification Program*

Note: Authority cited: Business and Professions Code Sections 4005, 4038, 4202. Reference: Business and Professions Code Sections 4005, 4038 and 4202.

M/S: Butler/ Veale

Support: 4 Oppose: 0 Abstain: 0

The committee continued its discussion and heard public comment in support of an interim approval of the technician certification programs until the regulations could be promulgated.

Motion: Recommend interim approval of the NHA ExCPT and the PTCB certification programs until the effective date of the regulation.

M/S: Veale/Wong

Support: 4 Oppose: 0 Abstain: 0

6. Discussion and Consideration of the Regulatory Proposal to Establish Operation Requirements for Third-Party Logistics Providers

Chair Weisser provided background on the item, reminding the committee that during the July 2015 Board Meeting, the board approved proposed regulation text to amend Title 16 CCR section 1780 et. seq., to establish the regulatory framework for third-party logistics Providers. Chair Weisser noted that the proposed regulations would establish the minimum standards by which such providers would need to comply which are consistent with current minimum standards for wholesalers.

The committee was reminded that this matter was later referred back to the committee after staff identified that additional modifications may be necessary.

The committee reviewed the proposed language and was advised that the primary change in this version of the language is the removal of a reference to a prior version of the United States Pharmacopoeia Standards in Section 1780(b). It was noted that board staff and counsel confirmed that compliance with the USP standards is already established as a requirement in federal law, both in the U.S. Code as well as in the Code of Federal Regulations and as such removal of the reference is appropriate.

Motion: Recommend to the board, approval of the proposed regulation language.
(language below)

Amend Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

Article 10. ~~Wholesalers~~ Dangerous Drug Distributors

To Amend Section 1780 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1780. Minimum Standards for ~~Wholesalers~~.

The following minimum standards shall apply to all wholesale and third-party logistics provider establishments for which permits have been issued by the Board:

(a) A wholesaler and a third-party logistics provider shall store dangerous drugs in a secured and lockable area.

(b) All wholesaler and third-party logistics provider premises, fixtures and equipment therein shall be maintained in a clean and orderly condition. Wholesale and third-party logistics provider premises shall be well ventilated, free from rodents and insects, and adequately lighted. Plumbing shall be in good repair. Temperature and humidity monitoring shall be conducted to assure compliance with the United States Pharmacopeia Standards (1990, 22nd Revision)-official compendium.

(c) Entry into areas where prescription drugs are held shall be limited to authorized personnel.

(1) All facilities shall be equipped with an alarm system to detect entry after hours.

(2) All facilities shall be equipped with a security system that will provide suitable protection against theft and diversion. When appropriate, the security system shall provide protection against theft or diversion that is facilitated or hidden by tampering with computers or electronic records.

(3) The outside perimeter of the ~~wholesaler~~ premises shall be well-lighted.

(d) All materials must be examined upon receipt and/or before shipment.

(1) Upon receipt, each outside shipping container shall be visually examined for identity and to prevent the acceptance of contaminated prescription drugs or prescription drugs that are otherwise unfit for distribution. This examination shall be adequate to reveal container damage that would suggest possible contamination or other damage to the contents.

(2) Each outgoing shipment shall be carefully inspected for identity of the prescription drug products and to ensure that there is no delivery of prescription drugs that have been damaged in storage or held under improper conditions.

(e) The following procedures must be followed for handling returned, damaged and outdated prescription drugs.

(1) Prescription drugs that are outdated, damaged, deteriorated, misbranded or adulterated shall be placed in a quarantine area and physically separated from other drugs until they are destroyed or returned to their supplier.

(2) Any prescription drugs whose immediate or sealed outer or sealed secondary containers have been opened or used shall be identified as such, and shall be placed in a quarantine area and physically separated from other prescription drugs until they are either destroyed or returned to the supplier.

(3) If the conditions under which a prescription drug has been returned cast doubt on the drug's safety, identity, strength, quality or purity, the drug shall be destroyed or returned to the supplier unless testing or other investigation proves that the drug meets appropriate United States Pharmacopeia Standards (1990, 22nd Revision).

(f) Policies and procedures must be written and made available upon request by the board.

(1) ~~Each~~ ~~wholesaler and third-party logistics provider drug distributors~~ shall establish, maintain, and adhere to written policies and procedures, which shall be followed for the receipt, security, storage, inventory and distribution of prescription drugs, including policies and procedures for identifying, recording, and reporting losses or thefts, for correcting all errors and inaccuracies in inventories, and for maintaining records to document proper storage.

(2) The records required by paragraph (1) shall be in accordance with Title 21, Code of Federal Regulations, Section 205.50(g). These records shall be maintained for three years after disposition of the drugs.

(3) ~~Each~~ ~~wholesaler and third-party logistics provider drug distributors~~ shall establish and maintain lists of officers, directors, managers and other persons in charge of ~~wholesale~~ drug distribution, storage and handling, including a description of their duties and a summary of their qualifications.

(4) Each wholesaler and third-party logistics provider shall provide adequate training and experience to assure compliance with licensing requirements by all personnel.

(g) The board shall require an applicant for a licensed premise or for renewal of that license to certify that it meets the requirements of this section at the time of licensure or renewal.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4043, 4045, 4051, 4053, 4053.1, 4054, 4059, 4120, 4160, 4161 and 4304, Business and Professions Code; Section 321 of Title 21, U.S. Code; and Section 205.05 of Title 21, Code of Federal Regulations.

Amend Section 1781 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1781. Exemption Certificate Designated Representative.

A registered pharmacist, ~~or an~~ designated representative or designated representative – 3PL certified in accordance with Section 4053, 4053.1 or 4054 of the Business and Professions Code shall be present and in control of a manufacturer's, ~~or wholesaler's~~ or a third-party logistics provider's licensed premises during the conduct of business.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4053, 4053.1 or 4054, Business and Professions Code.

Amend Section 1782 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1782. Reporting Sales of Drugs Subject to Abuse.

~~All~~ Each manufacturers, ~~and~~ wholesalers and third-party logistics provider shall report to the Board or its designee, up to twelve (12) times a year, all sales of dangerous drugs subject to abuse as designated by the Board for reporting, in excess of amounts to be determined by the Board from time to time. Reports shall be made within thirty (30) days of the request in the form specified by the Board.

Authority cited: Sections 4005 and 4164, Business and Professions Code; ~~and Section 26692, Health and Safety Code.~~ Reference: Sections 4053.1, 4081, 4164, and 4332, Business and Professions Code; ~~and Section 26692, Health and Safety Code.~~

Amend Section 1786 of Article 10 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

1783. Manufacturer, ~~or~~ Wholesaler or Third-Party Logistics Provider Furnishing Drugs and Devices.

(a) A manufacturer, ~~or~~ wholesaler or third-party logistics provider shall furnish dangerous drugs or devices only to an authorized person; prior to furnishing dangerous drugs and devices to a person not known to the furnisher, the manufacturer, ~~or~~ wholesaler, or third-party logistics provider shall contact the board or, if the person is licensed or registered by another government entity, that entity, to confirm the recipient is an authorized person.

(b) "Authorized person" means a person to whom the board has issued a permit which enables the permit holder to purchase dangerous drugs or devices for use within the scope of its permit. "Authorized person" also means any person in this state or in another jurisdiction within the United States to the extent such furnishing is authorized by the law of this state, any applicable federal law, and the law of the jurisdiction in which that person is located. The manufacturer, ~~or~~ wholesaler or third-party logistics provider furnishing to such person shall, prior to furnishing the dangerous drugs and devices, establish the intended recipient is legally authorized to receive the dangerous drugs or devices.

(c) Dangerous drugs or devices furnished by a manufacturer, ~~or~~ wholesaler or third-party logistics provider shall be delivered only to the premises listed on the permit; provided that a manufacturer, ~~or~~ wholesaler or third-party logistics provider may furnish drugs to an authorized person or an agent of that person at the premises of the manufacturer, ~~or~~ wholesaler or third-party logistics provider if (1) the identity and authorization of the recipient is properly established and (2) this method of receipt is employed only to meet the immediate needs of a particular patient of the authorized person. Dangerous drugs or devices may be furnished to a hospital pharmacy receiving area provided that a pharmacist or authorized receiving personnel signs, at the time of delivery, a receipt showing the type and quantity of the dangerous drugs or devices so received. Any discrepancy between the receipt and the type and quantity of dangerous drugs and devices actually received shall be reported to the delivering manufacturer, ~~or~~ wholesaler or third-party logistics provider by the next business day after the delivery to the pharmacy receiving area.

(d) A manufacturer, ~~or~~ wholesaler or third-party logistics provider shall not accept payment for or allow the use of an entity's credit to establish an account for the purchase of dangerous drugs or devices from any person other than: (1) the owner(s) of record, chief executive officer, or chief financial officer listed on the permit for the authorized person; and (2) on an account bearing the name of the permittee.

(e) All records of dangerous drugs or devices furnished by a manufacturer, ~~or~~ wholesaler or third-party logistics provider to an authorized person shall be preserved by the authorized person for at least three years from the date of making and shall, at all times during business hours, be open to inspection by authorized officers of the law at the licensed premises. The manufacturer, ~~or~~ wholesaler or third-party logistics provider shall also maintain all records of dangerous drugs or devices furnished pursuant to this section for at least three years from the date of making and shall, at all times during business hours, keep them open to inspection by authorized officers of the law at the premises

from which the dangerous drugs or devices were furnished.

Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4043, 4053.1, 4059, 4059.5, 4080, 4081, 4120, 4160, 4161, 4163 and 4304, Business and Professions Code; and Section 11209, Health and Safety Code.

M/S: Veale/ Wong

Support: 4 Oppose: 0 Abstain: 0

7. Presentation by the Office of Statewide Health Planning and Development (OSHPD) on its Scholarship Loan Repayment Program

Chair Weisser noted that in 2002 the California Pharmacist Scholarship and Loan Repayment Program was established with the Office of Statewide Health Planning and Development. Chair Weisser indicated that the program is funded by voluntarily contributions of \$25 that are collected as part of the renewal of pharmacist and pharmacy licenses.

The committee heard a presentation from a representative of OSHPD on the Health Professions Education Foundation, which is administered through OSHPD. The presentation included background information on foundation which awards scholarships and loan repayments to qualified health professionals, including pharmacists. The committee learned about the application and eligibility requirements and was advised that two pharmacists were awarded loan repayments in fiscal year 2015/16.

As part of its discussion, the committee was advised that OSHPD currently does not have staff available to administer the California Pharmacist Scholarship and Loan Repayment Program.

A copy of the presentation is provided as an attachment to the meeting minutes.

8. Discussion and Consideration of the National Association of Boards of Pharmacy's (NABP) Change in Policy Relating to the 91-Day Waiting Period for Candidates that Fail the NAPLEX

Chair Weisser noted that Business and Professions Code section 4200 establishes the requirements for licensure as a pharmacist including passage of the North America Pharmacist Licensure Examination (NAPLEX). Further section 4200.4 specifies that an applicant who fails the national examination may not retake the examination for at least 90 days or for a period established by regulation adopted by the board in consultation with the Office of Professional Examination Services (OPES).

Mr. Weisser advised the committee that in late July 2016, the NABP released information about changes in the administration of the NAPLEX including a change in the current waiting period a candidate must wait to retake the examination.

The committee asked about the logic behind the change and was advised by Ms. Herold

that the passing rate for the NAPLEX is going down and referenced the changes made to the administration of the NAPLEX.

The committee spoke in support of changes in the administration of the NAPLEX examination and requested that a letter be sent to the NABP acknowledging its support.

The committee discussed the current waiting periods for both the NAPLEX as well as the CPJE and if the changes would be appropriate.

The committee heard public comment in support of the reevaluation of the current waiting periods. Public comment also questioned, given the number of new pharmacy schools and students, if there are sufficient testing accommodations available to handle the additional students.

The committee noted the importance of safeguarding the integrity of the exam.

Motion: Work with the OPES to evaluate both the NAPLEX and CPJE and determine the appropriate waiting periods.

M/S: Butler/ Wong

Support: 4 Oppose: 0 Abstain: 0

The committee requested that this item be brought back to the committee after discussion and input from OPES.

9. Consideration of Request from Marshall B. Ketchum University, College of Pharmacy, for Recognition by the Board Under Title 16, California Code of Regulations Section 1719 for Purposes of Issuing Intern Licenses

Chairperson Weisser advised the committee of the provisions in regulation section 1719 states that a "recognized school of pharmacy" means a school accredited, or granted candidate status by the Accreditation Council for Pharmacy Education (ACPE) or otherwise recognized by the board.

Chair Weisser noted that there are three levels to full ACPE accreditation status for new schools of pharmacy: pre-candidate status, candidate status and full accreditation. A school may be granted candidate status once the school has produced its first class of graduates. It was noted that before possessing candidate status and while students are moving through the program at a new school, the school may have pre-candidate status with ACPE which means that the school is progressing to meet the ACPE accreditation standards but has not yet completed the process nor graduated its first class. In such cases, the board must recognize the school for purposes of issuing an intern license in order to allow students to secure the training expected by ACPE.

The committee was advised that The Marshal B. Ketchum University, College of Pharmacy has been granted pre-candidate status by the ACPE. In order for the school's students to secure the training they need, the students need intern licenses.

Vice-Chair Veale advised the committee that she participated in the ACPE onsite survey of the school and indicated that the surveyors were impressed with the program. Ms. Butler indicated that she has participated in a review of another school and noted how thorough the reviews are by the ACPE.

The committee discussed the request from school.

Motion: Recommend the board recognize The Marshall B. Ketchum University, School of Pharmacy for purposes of issuing intern permits.

M/S: Veale/ Butler

Support: 4 Oppose: 0 Abstain: 0

10. Future Committee Meeting Dates

The committee reviewed meeting dates for 2017 detailed below:

- January 10, 2017
- April 4, 2017 (Pharmacy Technician Summit)
- June 29, 2017
- September 19, 2017

11. Licensing Statistics

The committee reviewed the licensing statistics for July 1, 2016 – August 31, 2016

The board has received 3,733 applications including:

- 1,083 pharmacy technicians
- 626 intern pharmacists
- 390 pharmacist exam applications

The board has issued 2,134 licenses and renewed 10,748 licenses. The board currently has 138,915 active licenses including:

- 43,974 pharmacists
- 6,607 intern pharmacists
- 73,318 pharmacy technicians
- 6,568 pharmacies
- 518 hospitals and exempt hospitals

The committee was advised that staff continues to work with the department on implementing Licensing Performance Measures (LPM) processing times for the boards and bureaus and is currently validating the board's monthly LPM reports for FY 2015/2016.

The committee also discussed the general processing times for various license types and was advised that processing times were longer for some categories than the 30-day time frame. These delays are due in part of vacancies as well as cyclical surges in workload that occur after graduation from the schools of pharmacy as well as enrollment in pharmacy schools.