

**BEFORE THE
BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation Against:

**MARAVICH ENTERPRISES LLC, dba HIDDEN
VALLEY PHARMACY, MICHAEL MARAVICH
OWNER, HARISH R. ODEDRA, OWNER;**
19851 Hartman Road Unit C
Hidden Valley Lake, CA 95467

Retail Pharmacy Permit No. PHY 51432;

MICHAEL MARAVICH
9734 State Hwy 281 PMB 5030
Kelseyville, CA 95451

**Registered Pharmacist License No.
RPH 48738;**

and

HARISH R. ODEDRA
130 Turnberry Rd.
Half Moon Bay, CA 94019

Registered Pharmacist License No. RPH 43972

Respondents.

Case No. 6575

OAH No. 2019100127

DECISION AND ORDER

The attached Stipulated Settlement and Disciplinary Order for Public Reprimand is hereby adopted by the Board of Pharmacy, Department of Consumer Affairs, as its Decision in this matter.

This Decision shall become effective at 5:00 p.m. on February 12, 2020.

It is so ORDERED on January 13, 2020.

BOARD OF PHARMACY
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

A handwritten signature in black ink, appearing to read "Greg R. Lippe", written in a cursive style.

By

Greg Lippe
Board President

XAVIER BECERRA
Attorney General of California
DAVID E. BRICE
Supervising Deputy Attorney General
SUMMER D. HARO
Deputy Attorney General
State Bar No. 245482
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Attorneys for Complainant

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Pharmacist No. RPH 48738

And

HARISH R. ODEDRA
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Half Moon Bay, CA 94019

Pharmacist No. RPH 43972

Respondents.

Case No. 6575

OAH No. 2019100127

**STIPULATED SETTLEMENT AND
DISCIPLINARY ORDER FOR PUBLIC
REPROVAL AS TO HARISH R.
ODEDRA, ONLY**

[Bus. & Prof. Code § 495]

1 IT IS HEREBY STIPULATED AND AGREED by and between the parties to the above-
2 entitled proceedings that the following matters are true:

3 **PARTIES**

4 1. Anne Sodergren ("Complainant") is the Interim Executive Officer of the Board of
5 Pharmacy ("Board"). She brought this action solely in her official capacity and is represented in
6 this matter by Xavier Becerra, Attorney General of the State of California, by Summer D. Haro,
7 Deputy Attorney General.

8 2. Harish R. Odedra ("Respondent") is represented in this proceeding by attorney Noah
9 Jussim, Hinshaw & Culbertson, whose address is: 633 West 5th Street, 47th Floor
10 Los Angeles, California, 90071.

11 **JURISDICTION**

12 3. On or about March 4, 1991, the Board issued Registered Pharmacist License No.
13 RPH 43972 to Respondent. The Registered Pharmacist License was in full force and effect at all
14 times relevant to the charges brought in Accusation No. 6575 and will expire on September 30,
15 2020, unless renewed.

16 4. Accusation No. 6575 was filed before the Board of Pharmacy ("Board"), Department
17 of Consumer Affairs and is currently pending against Respondent. The Accusation and all other
18 statutorily required documents were properly served on Respondent on March 1, 2019.
19 Respondent timely filed his Notice of Defense contesting the Accusation. A copy of Accusation
20 No. 6575 is attached as **Exhibit A** and incorporated herein by reference.

21 **ADVISEMENT AND WAIVERS**

22 5. Respondent has carefully read, fully discussed with counsel, and understands the
23 charges and allegations in Accusation No. 6575. Respondent has also carefully read, fully
24 discussed with counsel, and understands the effects of this Stipulated Settlement and Disciplinary
25 Order for Public Repeval.

26 6. Respondent is fully aware of his legal rights in this matter, including the right to a
27 hearing on the charges and allegations in the Accusation; the right to be represented by counsel at
28 his own expense; the right to confront and cross-examine the witnesses against him; the right to

1 present evidence and to testify on his own behalf; the right to the issuance of subpoenas to compel
2 the attendance of witnesses and the production of documents; the right to reconsideration and
3 court review of an adverse decision; and all other rights accorded by the California
4 Administrative Procedure Act and other applicable laws.

5 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
6 every right set forth above.

7 **CULPABILITY**

8 8. Respondent admits the truth of each and every charge and allegation in Accusation
9 No. 6575.

10 9. Respondent agrees that his Registered Pharmacist License is subject to discipline and
11 he agrees to be bound by the Disciplinary Order below.

12 **CONTINGENCY**

13 10. This stipulation shall be subject to approval by the Board of Pharmacy. Respondent
14 understands and agrees that counsel for Complainant and the staff of the Board of Pharmacy may
15 communicate directly with the Board regarding this stipulation and settlement, without notice to
16 or participation by Respondent or his counsel. By signing the stipulation, Respondent
17 understands and agrees that he may not withdraw his agreement or seek to rescind the stipulation
18 prior to the time the Board considers and acts upon it. If the Board fails to adopt this stipulation
19 as its Decision and Order, the Stipulated Settlement and Disciplinary Order for Public Repeval
20 shall be of no force or effect, except for this paragraph, it shall be inadmissible in any legal action
21 between the parties, and the Board shall not be disqualified from further action by having
22 considered this matter.

23 11. The parties understand and agree that Portable Document Format ("PDF") and
24 facsimile copies of this Stipulated Settlement and Disciplinary Order for Public Repeval,
25 including Portable Document Format ("PDF") and facsimile signatures thereto, shall have the
26 same force and effect as the originals.

27 12. This Stipulated Settlement and Disciplinary Order for Public Repeval is intended by
28 the parties to be an integrated writing representing the complete, final, and exclusive embodiment

1 of their agreement. It supersedes any and all prior or contemporaneous agreements,
2 understandings, discussions, negotiations, and commitments (written or oral). This Stipulated
3 Settlement and Disciplinary Order for Public Reproval may not be altered, amended, modified,
4 supplemented, or otherwise changed except by a writing executed by an authorized representative
5 of each of the parties.

6 13. In consideration of the foregoing admissions and stipulations, the parties agree that
7 the Board may, without further notice or formal proceeding, issue and enter the following
8 Disciplinary Order:

9 **DISCIPLINARY ORDER**

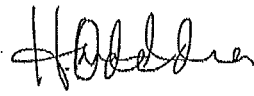
10 IT IS HEREBY ORDERED that Registered Pharmacist License No. RPH 43972 issued to
11 Respondent Harish R. Odedra shall be publicly reproved by the Board of Pharmacy under
12 Business and Professions Code section 495 in resolution of Accusation No. 6575, attached as
13 exhibit A.

14 **Cost Recovery.** Respondent shall pay \$11,317.88 to the Board for its costs associated with
15 the investigation and enforcement of this matter. Respondent shall be permitted to pay these
16 costs in a payment plan approved by the Board. If Respondent fails to pay the Board costs as
17 ordered, Respondent shall not be allowed to renew his Registered Pharmacist License until
18 Respondent pays costs in full.

19 **ACCEPTANCE**

20 I have carefully read the above Stipulated Settlement and Disciplinary Order for Public
21 Reproval and have fully discussed it with my attorney, Noah E. Jussim Esq. I understand the
22 stipulation and the effect it will have on my Registered Pharmacist License. I enter into this
23 Stipulated Settlement and Disciplinary Order for Public Reproval voluntarily, knowingly, and
24 intelligently, and agree to be bound by the Decision and Order of the Board of Pharmacy.

25
26 DATED: **10/30/19**

27 
HARISH R. ODEDRA
Respondent

1 I have read and fully discussed with Respondent Harish R. Odedra the terms and conditions
2 and other matters contained in the above Stipulated Settlement and Disciplinary Order for Public
3 Reproval. I approve its form and content.

4 DATED: 10/31/19

Nf.
NOAH E. JUSSIM ESQ.
Attorney for Respondent

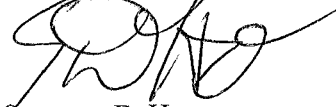
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7 **ENDORSEMENT**

8 The foregoing Stipulated Settlement and Disciplinary Order for Public Reproval is hereby
9 respectfully submitted for consideration by the Board of Pharmacy of the Department of
10 Consumer Affairs.

11 DATED: 11/5/19

Respectfully submitted,

13 XAVIER BECERRA
Attorney General of California
14 DAVID E. BRICE
Supervising Deputy Attorney General

15 
16 SUMMER D. HARO
Deputy Attorney General
17 *Attorneys for Complainant*

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Exhibit A

Accusation No. 6575

XAVIER BECERRA
Attorney General of California
DAVID E. BRICE
Supervising Deputy Attorney General
SUMMER D. HARO
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Attorneys for Complainant

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In the Matter of the Accusation Against:

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**MARAVICH ENTERPRISES LLC, dba
HIDDEN VALLEY PHARMACY,
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Pharmacist No. RPH 48738

And

HARISH R. ODEDRA
130 Turnberry Rd.,
Half Moon Bay, CA 94019

Pharmacist No. RPH 43972

Respondents.

A C C U S A T I O N

1 Complainant alleges:

2 **PARTIES**

3 1. Anne Sodergren (“Complainant”) brings this Accusation solely in her official
4 capacity as the Interim Executive Officer of the Board of Pharmacy (“Board”), Department of
5 Consumer Affairs.

6 2. On or about November 5, 2013, the Board of Pharmacy issued Permit Number PHY
7 51432 to Maravich Enterprises LLC dba Hidden Valley Pharmacy (“Respondent Hidden
8 Valley”). At all times relevant to the charges brought herein, Respondent Hidden Valley’s
9 shareholders were Michael Maravich (“Respondent Maravich”) and Harish R. Odedra
10 (“Respondent Odedra”). On or about November 5, 2013, Respondent Maravich became the
11 pharmacist-in-charge. Respondent Hidden Valley’s Permit was in full force and effect at all
12 times relevant to the charges brought herein, but expired on October 30, 2016, and has not been
13 renewed.

14 3. On or about August 12, 1996, the Board issued Registered Pharmacist License
15 Number RPH 48738 to Respondent Maravich. The Registered Pharmacist License was in full
16 force and effect at all times relevant to the charges brought herein and will expire on September
17 30, 2019, unless renewed.

18 4. On or about March 1, 1991, the Board issued Registered Pharmacist License Number
19 RPH 43972 to Respondent Odedra. The Registered Pharmacist License was in full force and
20 effect at all times relevant to the charges brought herein and will expire on September 30, 2020,
21 unless renewed.

22 **JURISDICTION**

23 5. This Accusation is brought before the Board under the authority of the following
24 laws. All section references are to the Business and Professions Code (“Code”) unless otherwise
25 indicated.

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1 6. Code section 4300 states, in pertinent part:

2 (a) Every license issued may be suspended or revoked.

3 (b) The board shall discipline the holder of any license issued by the
4 board, whose default has been entered or whose case has been heard by the board
 and found guilty, by any of the following methods:

- 5 (1) Suspending judgment.
6 (2) Placing him or her upon probation.
7 (3) Suspending his or her right to practice for a period not
 exceeding one year.
8 (4) Revoking his or her license.
 (5) Taking any other action in relation to disciplining him or
 her as the board in its discretion may deem proper . . .

9 7. Code section 4300.1 states:

10 The expiration, cancellation, forfeiture, or suspension of a board-issued
11 license by operation of law or by order or decision of the board or a court of law,
12 the placement of a license on a retired status, or the voluntary surrender of a
13 license by a licensee shall not deprive the board of jurisdiction to commence or
 proceed with any investigation of, or action or disciplinary proceeding against, the
 licensee or to render a decision suspending or revoking the license.

14 8. Code section 4307 states:

15 (a) Any person who has been denied a license or whose license has been
16 revoked or is under suspension, or who has failed to renew his or her license
17 while it was under suspension, or who has been a manager, administrator, owner,
18 member, officer, director, associate, partner, or any other person with
19 management or control of any partnership, corporation, trust, firm, or association
20 whose application for a license has been denied or revoked, is under suspension or
21 has been placed on probation, and while acting as the manager, administrator,
 owner, member, officer, director, associate, 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, partner, or in any other position with
 management or control of a licensee as follows:

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

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

26 (b) Manager, administrator, owner, member, officer, director, associate,
27 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 such capacity in or for a licensee.

28 ///

1 (c) The provisions of subdivision (a) may be alleged in any pleading filed
2 pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3
3 of the Government Code. However, no order may be issued in that case except as
4 to a person who is named in the caption, as to whom the pleading alleges the
5 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.

6 **STATUTORY AND REGULATORY PROVISIONS**

7 **A. Business & Professions Code**

8 9. Code section 4301 states, in pertinent part:

9 The board shall take action against any holder of a license who is guilty of
10 unprofessional conduct . . . Unprofessional conduct shall include, but is not
limited to, any of the following:

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

13 (f) The commission of any act involving moral turpitude, dishonesty, fraud,
14 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.

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

17 (o) Violating or attempting to violate, directly or indirectly, or assisting in or
18 abetting the violation of or conspiring to violate any provision or term of this
19 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
20 federal regulatory agency

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

23 10. Code section 4306.5 states, in pertinent part:

24 Unprofessional conduct for a pharmacist may include any of the following:

25 (a) Acts or omissions that involve, in whole or in part, the inappropriate
26 exercise of his or her education, training, or experience as a pharmacist, whether
27 or not the act or omission arises in the course of the practice of pharmacy or the
ownership, management, administration, or operation of a pharmacy or other
entity licensed by the board.

28 ///

1 (b) Acts or omissions that involve, in whole or in part, the failure to
2 exercise or implement his or her best professional judgment or corresponding
3 responsibility with regard to the dispensing or furnishing of controlled substances,
4 dangerous drugs, or dangerous devices, or with regard to the provision of
5 services.

6 (c) Acts or omissions that involve, in whole or in part, the failure to
7 consult appropriate patient, prescription, and other records pertaining to the
8 performance of any pharmacy function . . .

9 11. Section 4081 of the Code states:

10 (a) All records of manufacture and of sale, acquisition, or disposition of
11 dangerous drugs or dangerous devices shall be at all times during business hours
12 open to inspection by authorized officers of the law, and shall be preserved for at
13 least three years from the date of making. A current inventory shall be kept by
14 every manufacturer, wholesaler, pharmacy, veterinary food-animal drug retailer,
15 physician, dentist, podiatrist, veterinarian, laboratory, clinic, hospital, institution,
16 or establishment holding a currently valid and unrevoked certificate, license,
17 permit, registration, or exemption under Division 2 (commencing with Section
18 1200) of the Health and Safety Code or under Part 4 (commencing with Section
19 16000) of Division 9 of the Welfare and Institutions Code who maintains a stock
20 of dangerous drugs or dangerous devices.

21 (b) The owner, officer, and partner of any pharmacy, wholesaler, or
22 veterinary food-animal drug retailer shall be jointly responsible, with the
23 pharmacist-in-charge or representative-in-charge, for maintaining the records and
24 inventory described in this section.

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

12. Section 4105 of the Code states:

13 (a) All records or other documentation of the acquisition and disposition of
14 dangerous drugs and dangerous devices by any entity licensed by the board shall
15 be retained on the licensed premises in a readily retrievable form.

16 (b) The licensee may remove the original records or documentation from the
17 licensed premises on a temporary basis for license-related purposes. However, a
18 duplicate set of those records or other documentation shall be retained on the
19 licensed premises.

20 (c) The records required by this section shall be retained on the licensed
21 premises for a period of three years from the date of making.

22 (d)(1) Any records that are maintained electronically shall be maintained so
23 that the pharmacist-in-charge, the pharmacist on duty if the pharmacist-in-charge
24 is not on duty, or, in the case of a veterinary food-animal drug retailer or
25 wholesaler, the designated representative on duty, shall, at all times during which
26 the licensed premises are open for business, be able to produce a hard copy and
27 electronic copy of all records of acquisition or disposition or other drug or
28 dispensing-related records maintained electronically.

13. Code section 4333 states, in pertinent part:

(a) All prescriptions filled by a pharmacy and all other records required by Section 4081 shall be maintained on the premises and available for inspection by authorized officers of the law for a period of at least three years. In cases where the pharmacy discontinues business, these records shall be maintained in a board-licensed facility for at least three years.

14. Code section 4113, subdivision (c), states that “[t]he pharmacist-in-charge shall be responsible for a pharmacy's compliance with all state and federal laws and regulations pertaining to the practice of pharmacy.”

B. Health & Safety Code

15. Health and Safety Code section 11153 states:

(a) A prescription for a controlled substance shall only be issued for a legitimate medical purpose by an individual practitioner acting in the usual course of his or her professional practice. The responsibility for the proper prescribing and dispensing of controlled substances is upon the prescribing practitioner, but a corresponding responsibility rests with the pharmacist who fills the prescription. Except as authorized by this division, the following are not legal prescriptions: (1) an order purporting to be a prescription which is issued not in the usual course of professional treatment or in legitimate and authorized research; or (2) an order for an addict or habitual user of controlled substances, which is issued not in the course of professional treatment or as part of an authorized narcotic treatment program, for the purpose of providing the user with controlled substances, sufficient to keep him or her comfortable by maintaining customary use.

(b) Any person who knowingly violates this section shall be punished by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code, or in a county jail not exceeding one year, or by a fine not exceeding twenty thousand dollars (\$20,000), or by both that fine and imprisonment.

16. Health and Safety Code section 11205 states:

The owner of a pharmacy or any person who purchases a controlled substance upon federal order forms as required pursuant to the provisions of the Federal “Comprehensive Drug Abuse Prevention and Control Act of 1970,” (P.L. 91-513, 84 Stat. 1236),¹ relating to the importation, exportation, manufacture, production, compounding, distribution, dispensing, and control of controlled substances, and who sells controlled substances obtained upon such federal order forms in response to prescriptions shall maintain and file such prescriptions in a separate file apart from noncontrolled substances prescriptions. Such files shall be preserved for a period of three years.

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D. Civil Code

17. California Civil Code section 56.10 states:

(a) A provider of health care, health care service plan, or contractor shall not disclose medical information regarding a patient of the provider of health care or an enrollee or subscriber of a health care service plan without first obtaining an authorization, except as provided in subdivision (b) or (c).

(b) A provider of health care, a health care service plan, or a contractor shall disclose medical information if the disclosure is compelled by any of the following:

(1) By a court pursuant to an order of that court.

(2) By a board, commission, or administrative agency for purposes of adjudication pursuant to its lawful authority.

(3) By a party to a proceeding before a court or administrative agency pursuant to a subpoena, subpoena duces tecum, notice to appear served pursuant to Section 1987 of the Code of Civil Procedure, or any provision authorizing discovery in a proceeding before a court or administrative agency.

(4) By a board, commission, or administrative agency pursuant to an investigative subpoena issued under Article 2 (commencing with Section 11180) of Chapter 2 of Part 1 of Division 3 of Title 2 of the Government Code.

(5) By an arbitrator or arbitration panel, when arbitration is lawfully requested by either party, pursuant to a subpoena duces tecum issued under Section 1282.6 of the Code of Civil Procedure, or another provision authorizing discovery in a proceeding before an arbitrator or arbitration panel.

(6) By a search warrant lawfully issued to a governmental law enforcement agency.

(7) By the patient or the patient's representative pursuant to Chapter 1 (commencing with Section 123100) of Part 1 of Division 106 of the Health and Safety Code.

(8) By a medical examiner, forensic pathologist, or coroner, when requested in the course of an investigation by a medical examiner, forensic pathologist, or coroner's office for the purpose of identifying the decedent or locating next of kin, or when investigating deaths that may involve public health concerns, organ or tissue donation, child abuse, elder abuse, suicides, poisonings, accidents, sudden infant deaths, suspicious deaths, unknown deaths, or criminal deaths, or upon notification of, or investigation of, imminent deaths that may involve organ or tissue donation pursuant to Section 7151.15 of the Health and Safety Code, or when otherwise authorized by the decedent's representative. Medical information requested by a medical examiner, forensic pathologist, or coroner under this paragraph shall be limited to information regarding the patient who is the decedent and who is the subject of the investigation or who is the prospective donor and shall be disclosed to a medical examiner, forensic pathologist, or coroner without delay upon request. A medical examiner, forensic pathologist, or coroner shall not disclose the information contained in the medical record obtained pursuant to this paragraph to a third party without a court order or authorization pursuant to paragraph (4) of subdivision (c) of Section 56.11.

(9) When otherwise specifically required by law.

(c) A provider of health care or a health care service plan may disclose medical information as follows:

(1) The information may be disclosed to providers of health care, health care service plans, contractors, or other health care professionals or facilities for purposes of diagnosis or treatment of the patient. This includes, in an emergency situation, the communication of patient information by radio transmission or other means between emergency medical personnel at the scene of an emergency, or in an emergency medical transport vehicle, and emergency medical personnel at a health facility licensed pursuant to Chapter 2 (commencing with Section 1250) of Division 2 of the Health and Safety Code.

(2) The information may be disclosed to an insurer, employer, health care service plan, hospital service plan, employee benefit plan, governmental authority, contractor, or other person or entity responsible for paying for health care services rendered to the patient, to the extent necessary to allow responsibility for payment to be determined and payment to be made. If (A) the patient is, by reason of a comatose or other disabling medical condition, unable to consent to the disclosure of medical information and (B) no other arrangements have been made to pay for the health care services being rendered to the patient, the information may be disclosed to a governmental authority to the extent necessary to determine the patient's eligibility for, and to obtain, payment under a governmental program for health care services provided to the patient. The information may also be disclosed to another provider of health care or health care service plan as necessary to assist the other provider or health care service plan in obtaining payment for health care services rendered by that provider of health care or health care service plan to the patient.

(3) The information may be disclosed to a person or entity that provides billing, claims management, medical data processing, or other administrative services for providers of health care or health care service plans or for any of the persons or entities specified in paragraph (2). However, information so disclosed shall not be further disclosed by the recipient in a way that would violate this part.

(4) The information may be disclosed to organized committees and agents of professional societies or of medical staffs of licensed hospitals, licensed health care service plans, professional standards review organizations, independent medical review organizations and their selected reviewers, utilization and quality control peer review organizations as established by Congress in Public Law 97-248 in 1982, contractors, or persons or organizations insuring, responsible for, or defending professional liability that a provider may incur, if the committees, agents, health care service plans, organizations, reviewers, contractors, or persons are engaged in reviewing the competence or qualifications of health care professionals or in reviewing health care services with respect to medical necessity, level of care, quality of care, or justification of charges.

(5) The information in the possession of a provider of health care or a health care service plan may be reviewed by a private or public body responsible for licensing or accrediting the provider of health care or a health care service plan. However, no patient-identifying medical information may be removed from the premises except as expressly permitted or required elsewhere by law, nor shall that information be further disclosed by the recipient in a way that would violate this part.

1 (6) The information may be disclosed to a medical examiner, forensic
2 pathologist, or county coroner in the course of an investigation by a medical
3 examiner, forensic pathologist, or coroner's office when requested for all
4 purposes not included in paragraph (8) of subdivision (b). A medical examiner,
5 forensic pathologist, or coroner shall not disclose the information contained in the
6 medical record obtained pursuant to this paragraph to a third party without a court
7 order or authorization pursuant to paragraph (4) of subdivision (c) of Section
8 56.11.

9 (7) The information may be disclosed to public agencies, clinical
10 investigators, including investigators conducting epidemiologic studies, health
11 care research organizations, and accredited public or private nonprofit educational
12 or health care institutions for bona fide research purposes. However, no
13 information so disclosed shall be further disclosed by the recipient in a way that
14 would disclose the identity of a patient or violate this part.

15 (8) A provider of health care or health care service plan that has created
16 medical information as a result of employment-related health care services to an
17 employee conducted at the specific prior written request and expense of the
18 employer may disclose to the employee's employer that part of the information
19 that:

20 (A) Is relevant in a lawsuit, arbitration, grievance, or other claim
21 or challenge to which the employer and the employee are parties and in which the
22 patient has placed in issue his or her medical history, mental or physical
23 condition, or treatment, provided that information may only be used or disclosed
24 in connection with that proceeding.

25 (B) Describes functional limitations of the patient that may entitle
26 the patient to leave from work for medical reasons or limit the patient's fitness to
27 perform his or her present employment, provided that no statement of medical
28 cause is included in the information disclosed.

(9) Unless the provider of health care or a health care service plan is
notified in writing of an agreement by the sponsor, insurer, or administrator to the
contrary, the information may be disclosed to a sponsor, insurer, or administrator
of a group or individual insured or uninsured plan or policy that the patient seeks
coverage by or benefits from, if the information was created by the provider of
health care or health care service plan as the result of services conducted at the
specific prior written request and expense of the sponsor, insurer, or administrator
for the purpose of evaluating the application for coverage or benefits.

(10) The information may be disclosed to a health care service plan by
providers of health care that contract with the health care service plan and may be
transferred among providers of health care that contract with the health care
service plan, for the purpose of administering the health care service plan.
Medical information shall not otherwise be disclosed by a health care service plan
except in accordance with this part.

(11) This part does not prevent the disclosure by a provider of health
care or a health care service plan to an insurance institution, agent, or support
organization, subject to Article 6.6 (commencing with Section 791) of Chapter 1
of Part 2 of Division 1 of the Insurance Code, of medical information if the
insurance institution, agent, or support organization has complied with all of the

1 requirements for obtaining the information pursuant to Article 6.6 (commencing
2 with Section 791) of Chapter 1 of Part 2 of Division 1 of the Insurance Code.

3 (12) The information relevant to the patient's condition, care, and
4 treatment provided may be disclosed to a probate court investigator in the course
5 of an investigation required or authorized in a conservatorship proceeding under
6 the Guardianship-Conservatorship Law as defined in Section 1400 of the Probate
Code, or to a probate court investigator, probation officer, or domestic relations
investigator engaged in determining the need for an initial guardianship or
continuation of an existing guardianship.

7 (13) The information may be disclosed to an organ procurement
8 organization or a tissue bank processing the tissue of a decedent for
transplantation into the body of another person, but only with respect to the
donating decedent, for the purpose of aiding the transplant. For the purpose of this
9 paragraph, "tissue bank" and "tissue" have the same meanings as defined in
Section 1635 of the Health and Safety Code.

10 (14) The information may be disclosed when the disclosure is
11 otherwise specifically authorized by law, including, but not limited to, the
voluntary reporting, either directly or indirectly, to the federal Food and Drug
Administration of adverse events related to drug products or medical device
12 problems, or to disclosures made pursuant to subdivisions (b) and (c) of Section
11167 of the Penal Code by a person making a report pursuant to Sections
11165.9 and 11166 of the Penal Code, provided that those disclosures concern a
13 report made by that person.

14 (15) Basic information, including the patient's name, city of residence,
15 age, sex, and general condition, may be disclosed to a state-recognized or
federally recognized disaster relief organization for the purpose of responding to
16 disaster welfare inquiries.

17 (16) The information may be disclosed to a third party for purposes of
18 encoding, encrypting, or otherwise anonymizing data. However, no information
so disclosed shall be further disclosed by the recipient in a way that would violate
this part, including the unauthorized manipulation of coded or encrypted medical
19 information that reveals individually identifiable medical information.

20 (17) For purposes of disease management programs and services as
21 defined in Section 1399.901 of the Health and Safety Code, information may be
disclosed as follows: (A) to an entity contracting with a health care service plan or
the health care service plan's contractors to monitor or administer care of
22 enrollees for a covered benefit, if the disease management services and care are
authorized by a treating physician, or (B) to a disease management organization,
23 as defined in Section 1399.900 of the Health and Safety Code, that complies fully
with the physician authorization requirements of Section 1399.902 of the Health
and Safety Code, if the health care service plan or its contractor provides or has
24 provided a description of the disease management services to a treating physician
or to the health care service plan's or contractor's network of physicians. This
25 paragraph does not require physician authorization for the care or treatment of the
adherents of a well-recognized church or religious denomination who depend
26 solely upon prayer or spiritual means for healing in the practice of the religion of
that church or denomination.
27
28

1 (18) The information may be disclosed, as permitted by state and
2 federal law or regulation, to a local health department for the purpose of
3 preventing or controlling disease, injury, or disability, including, but not limited
4 to, the reporting of disease, injury, vital events, including, but not limited to, birth
or death, and the conduct of public health surveillance, public health
investigations, and public health interventions, as authorized or required by state
or federal law or regulation.

5 (19) The information may be disclosed, consistent with applicable law
6 and standards of ethical conduct, by a psychotherapist, as defined in Section 1010
7 of the Evidence Code, if the psychotherapist, in good faith, believes the disclosure
8 is necessary to prevent or lessen a serious and imminent threat to the health or
safety of a reasonably foreseeable victim or victims, and the disclosure is made to
a person or persons reasonably able to prevent or lessen the threat, including the
target of the threat.

9 (20) The information may be disclosed as described in Section 56.103.

10 (21)

11 (A) The information may be disclosed to an employee welfare
12 benefit plan, as defined under Section 3(1) of the Employee Retirement Income
13 Security Act of 1974 (29 U.S.C. Sec. 1002(1)), which is formed under Section
14 302(c)(5) of the Taft-Hartley Act (29 U.S.C. Sec. 186(c)(5)), to the extent that the
employee welfare benefit plan provides medical care, and may also be disclosed
15 to an entity contracting with the employee welfare benefit plan for billing, claims
management, medical data processing, or other administrative services related to
the provision of medical care to persons enrolled in the employee welfare benefit
plan for health care coverage, if all of the following conditions are met:

16 (i) The disclosure is for the purpose of determining
17 eligibility, coordinating benefits, or allowing the employee welfare benefit plan or
the contracting entity to advocate on the behalf of a patient or enrollee with a
provider, a health care service plan, or a state or federal regulatory agency.

18 (ii) The request for the information is accompanied by a
19 written authorization for the release of the information submitted in a manner
consistent with subdivision (a) and Section 56.11.

20 (iii) The disclosure is authorized by and made in a manner
21 consistent with the Health Insurance Portability and Accountability Act of 1996
(Public Law 104-191).

22 (iv) Any information disclosed is not further used or
23 disclosed by the recipient in any way that would directly or indirectly violate this
24 part or the restrictions imposed by Part 164 of Title 45 of the Code of Federal
Regulations, including the manipulation of the information in any way that might
reveal individually identifiable medical information.

25 (B) For purposes of this paragraph, Section 1374.8 of the Health
26 and Safety Code shall not apply.

27 (22) Information may be disclosed pursuant to subdivision (a) of
28 Section 15633.5 of the Welfare and Institutions Code by a person required to
make a report pursuant to Section 15630 of the Welfare and Institutions Code,
provided that the disclosure under subdivision (a) of Section 15633.5 concerns a

report made by that person. Covered entities, as they are defined in Section 160.103 of Title 45 of the Code of Federal Regulations, shall comply with the requirements of the Health Insurance Portability and Accountability Act (HIPAA) privacy rule pursuant to subsection (c) of Section 164.512 of Title 45 of the Code of Federal Regulations if the disclosure is not for the purpose of public health surveillance, investigation, intervention, or reporting an injury or death.

(d) Except to the extent expressly authorized by a patient, enrollee, or subscriber, or as provided by subdivisions (b) and (c), a provider of health care, health care service plan, contractor, or corporation and its subsidiaries and affiliates shall not intentionally share, sell, use for marketing, or otherwise use medical information for a purpose not necessary to provide health care services to the patient.

(e) Except to the extent expressly authorized by a patient or enrollee or subscriber or as provided by subdivisions (b) and (c), a contractor or corporation and its subsidiaries and affiliates shall not further disclose medical information regarding a patient of the provider of health care or an enrollee or subscriber of a health care service plan or insurer or self-insured employer received under this section to a person or entity that is not engaged in providing direct health care services to the patient or his or her provider of health care or health care service plan or insurer or self-insured employer.

(f) For purposes of this section, a reference to a “medical examiner, forensic pathologist, or coroner” means a coroner or deputy coroner as described in subdivision (c) of Section 830.35 of the Penal Code, or a licensed physician who currently performs official autopsies on behalf of a county coroner’s office or a medical examiner’s office, whether as a government employee or under contract to that office.

E. California Regulations

18. California Code of Regulations, Title 16, (“CCR”) section 1761, subdivision (a), states:

No pharmacist shall compound or dispense any prescription which contains any significant error, omission, irregularity, uncertainty, ambiguity or alteration. Upon receipt of any such prescription, the pharmacist shall contact the prescriber to obtain the information needed to validate the prescription.

19. CCR section 1764, states:

No pharmacist shall exhibit, discuss, or reveal the contents of any prescription, the therapeutic effect thereof, the nature, extent, or degree of illness suffered by any patient or any medical information furnished by the prescriber with any person other than the patient or his or her authorized representative, the prescriber or other licensed practitioner then caring for the patient, another licensed pharmacist serving the patient, or a person duly authorized by law to receive such information.

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1 **COST RECOVERY**

2 20. Code section 125.3 provides, in pertinent part, that a Board may request the
3 administrative law judge to direct a licentiate found to have committed a violation or violations of
4 the licensing act to pay a sum not to exceed the reasonable costs of the investigation and
5 enforcement of the case.

6 **DRUG CLASSIFICATIONS**

7 21. Oxycodone is a Schedule II controlled substance pursuant to Health and Safety Code
8 section 11055, subdivision (b)(1)(M), and a dangerous drug pursuant to Code section 4022.
9 Oxycodone is used to treat pain. “Roxicodone” is a brand of oxycodone.

10 22. Hydrocodone/acetaminophen is a Schedule II controlled substance pursuant to Health
11 and Safety Code section 11056, subdivision (e), and a Schedule II controlled substance pursuant
12 to Title 21, CFR, section 1308.12, subdivision (b)(1)(vi).¹ Hydrocodone/acetaminophen is also a
13 dangerous drug pursuant to Code section 4022. Hydrocodone/acetaminophen is used to treat
14 pain. “Norco” is a brand of hydrocodone/acetaminophen.

15 **CURES PROGRAM**

16 23. The Controlled Substance Utilization Review and Evaluation System (“CURES”)
17 program was initiated in 1998 and required mandatory monthly pharmacy reporting of dispensed
18 Schedule II controlled substances. The program was amended in January 2005 to include
19 mandatory weekly reporting of Schedule II to IV medications. The data is collected statewide
20 and can be used by healthcare professionals, such as pharmacists and prescribers, to evaluate and
21 determine whether their patients are utilizing their controlled substances safely and appropriately.

22 24. The component of CURES which is accessible to pharmacists and prescribers is
23 called the Prescription Drug Monitoring Program (“PDMP”). Registration for access to the
24 PDMP has been available since February 2009. The data may be used to aid in determining
25 whether a patient sees multiple prescribers, frequents multiple pharmacies to fill controlled
26 substance prescriptions, and/or obtains early refills of controlled substance prescriptions.

27 ¹ Hydrocodone/acetaminophen was rescheduled to a Schedule II controlled substance
28 effective October 6, 2014.

FACTUAL ALLEGATIONS

25. On or about November 5, 2013, Respondent Maravich and Respondent Odedra became owners of Respondent Hidden Valley Pharmacy.

26. On or about April 29, 2016, it was posted on the Board's public site that Dr. B.'s prescription blanks had been stolen.

27. On or about November 8, 2016, Board Inspector P.P. analyzed CURES data for N.S. The CURES data showed that Respondent Hidden Valley dispensed five controlled substances for N.S. between March 11, 2016, and May 25, 2016. In reviewing the CURES data, Board Inspector P.P. found certain "red flags" or irregularities indicating that Respondent Hidden Valley was dispensing the drugs indiscriminately; i.e., without exercising its corresponding responsibility with regard to the dispensing or furnishing of the drugs. Those "red flags" included CURES data showing that Respondent Hidden Valley dispensed controlled substances to N.S. that were written on stolen prescription blanks. Respondent Hidden Valley dispensed two prescriptions for controlled substances under Dr. B's name to N.S. after a public notice was posted on the Board's website. Respondent Hidden Valley dispensed a thirty-day supply of hydrocodone/apap on May 10, 2016. On May 25, 2016 another controlled substance was filled for patient N.S. by Respondent Hidden Valley for oxycodone/apap.

28. On or about September 22, 2016, Board Inspector S.M. went to Respondent Hidden Valley to conduct a routine inspection. At the start of the inspection Respondent Maravich, informed the Inspector that he no was longer accepting new prescriptions and was closing the pharmacy in three days. Inspector S.M. discussed the proper procedure for completing a discontinuance of business form with the Board. In addition, she showed Respondent Maravich where to find a discontinuance of business form, provided him with a list of procedures for closing pharmacy and explained to Respondent Maravich that he could not keep Respondent Hidden Valley's records in an unlicensed facility.

29. On or about October 30, 2016, Respondent Maravich closed Respondent Hidden Valley, removed records and dangerous drugs without notifying the Board, and placed the records in an unidentified location. A discontinuance of business form had not been filed for Respondent

1 Hidden Valley.

2 30. On or about December 13, 2016, Respondent Maravich told Board Inspectors S.M.
3 and P.P. he stored the patient records from Respondent Hidden Valley at Kmart, a licensed site.
4 But Respondent Hidden Valley never entered an agreement for Kmart to store their records.
5 When Board Inspectors S.M. and P.P. asked Respondent Maravich to show them where the
6 patient records from Respondent Hidden Valley were stored at Kmart, Respondent Maravich
7 admitted that they were not stored at Kmart. Respondent Maravich then told the Board Inspectors
8 the records were not at Kmart and instead stated that some of the records were in his car and some
9 were at his home. Inspector S.M. went with Respondent Maravich to his car and no records were
10 present. Respondent Maravich then stated that Respondent Hidden Valley's records were at his
11 house, and that he would produce them at a later date.

12 31. On or about January 1, 2017, Board Inspector P.P. received a letter from Respondent
13 Maravich stating that he could not locate any of the requested patient records from Respondent
14 Hidden Valley and that he could no longer access Respondent Hidden Valley's computer system
15 to obtain the medication profile for N.S. Respondent Maravich stated in this letter that he
16 dispensed all the prescriptions to patient N.S. and did not verify the legitimacy of the
17 prescriptions dispensed. Respondent Maravich also stated that he could not store the patient
18 records from Respondent Hidden Valley at Kmart, and that none of the local pharmacies would
19 accept the files.

20 32. Since January 1, 2017, the Board has not received the requested patient records from
21 Respondent Hidden Valley, or information about the location of all the patient records from
22 Respondent Hidden Valley.

23 33. On or about March 23, 2018, the Board was contacted by B.R. asking for advice on
24 how to discard forty-eight boxes of pharmacy documents left in an attic space of his former tenant
25 Respondent Hidden Valley. The building owner B.R. moved the boxes to an office space at an
26 unlicensed facility. On or about April 26, 2018, Board Inspector S.M. inventoried all of the boxes
27 and determined that the forty-eight boxes contained acquisition and disposition documents of
28 dangerous drugs and dangerous devices from another pharmacy and Respondent Hidden Valley

1 Pharmacy dating from 2007 to 2012.

2 **CAUSES FOR DISCIPLINE**

3 **A. Respondent Hidden Valley Pharmacy**

4 **FIRST CAUSE FOR DISCIPLINE**

5 **(Unprofessional Conduct—Respondent Hidden Valley)**

6 34. Respondent Hidden Valley is subject to disciplinary action for unprofessional conduct
7 under Code section 4301 subdivisions (f), and (q), in that Respondent Hidden Valley committed
8 acts involving moral turpitude, dishonesty, fraud, deceit, or corruption, and engaged in conduct
9 that subverted or attempted to subvert an investigation of the Board by repeatedly being dishonest
10 about the location of Respondent Hidden Valley's patient records, by concealing those records,
11 and by repeatedly filling prescriptions for controlled substances for N.S., which were made
12 fraudulently from stolen blanks, as set forth in paragraphs 25 through 33, above.

13 **SECOND CAUSE FOR DISCIPLINE**

14 **(Failure to Verify Legitimacy of Controlled Substance Prescriptions**
15 **—Respondent Hidden Valley)**

16 35. Respondent Hidden Valley is subject to disciplinary action for failing to verify the
17 legitimacy of controlled substance prescriptions in violation of CCR section 1761, and Health and
18 Safety Code 11153 subdivisions (a) and (b), by and through Code section 4301, subdivision (o),
19 in that Respondent Hidden Valley failed to verify the legitimacy of controlled substance
20 prescriptions for patient N.S., and continued to fill controlled substance prescriptions for patient
21 N.S. after notice was made available to all licensees that Dr. B's blank prescription pad had been
22 stolen, as set forth in paragraphs 25 through 27, above.

23 **THIRD CAUSE FOR DISCIPLINE**

24 **(Failure to Retain Records of Dangerous Drugs on Licensed Premises**
25 **—Respondent Hidden Valley)**

26 36. Respondent Hidden Valley is subject to disciplinary action for failing to retain
27 records or other documentation of the acquisition and disposition of dangerous drugs and
28 dangerous devices in violation of Code sections 4105 subdivisions (b), (c), and (d), and 4333

subdivision (a), by and through Code section 4301, subdivision (o), in that Respondent Hidden Valley failed to maintain records of the acquisition and disposition of dangerous drugs for at least three years from the date of making in a site licensed by the Board, and failing to maintain electronic records in a manner which allows a pharmacist on duty or pharmacist-in-charge to produce a hard copy and electronic copy of all records of acquisition or disposition or other drug or dispensing-related records, as set forth in paragraphs 25 and 33, above.

B. Respondent Maravich

37. Respondent Maravich has been designated the Pharmacist-In-Charge for Respondent Hidden Valley Pharmacy under Code section 4113, subdivision (a) since November 5, 2013. As Pharmacist-In-Charge for Respondent Hidden Valley, Respondent Maravich was responsible for Respondent Hidden Valley's compliance with all state and federal laws and regulations to the practice of pharmacy under Code section 4113(c).

FOURTH CAUSE FOR DISCIPLINE

(Unprofessional Conduct — Respondent Maravich)

38. Respondent Maravich is subject to disciplinary action for unprofessional conduct under Code section 4301 subdivisions (f) and (q), in that Respondent Maravich committed acts involving moral turpitude, dishonesty, fraud, deceit, or corruption, and engaged in conduct that subverted or attempted to subvert an investigation of the Board by repeatedly being dishonest about the location of Respondent Hidden Valley's patient records, by concealing those records, and by repeatedly filling prescriptions for controlled substances for N.S., which were made fraudulently from stolen blanks, as set forth in paragraphs 25 through 33, above.

FIFTH CAUSE FOR DISCIPLINE

**(Failure to Verify Legitimacy of Controlled Substance Prescriptions
—Respondent Maravich)**

39. Respondent Maravich is subject to disciplinary action for failing to verify the legitimacy of controlled substance prescriptions in violation of CCR section 1761, and Health and Safety Code 11153 subdivisions (a) and (b), by and through Code section 4301, subdivision (o), in that Respondent Maravich failed to verify the legitimacy of controlled substance prescriptions

1 for patient N.S., and continued to fill controlled substance prescriptions for patient N.S. after
2 notice was made available to all licensees that Dr. B's blank prescription pad had been stolen, as
3 set forth in paragraphs 25 through 27, above.

4 **SIXTH CAUSE FOR DISCIPLINE**

5 **(Failure to Retain Records of Dangerous Drugs on Licensed Premises**
6 **—Respondent Maravich)**

7 40. Respondent Maravich is subject to disciplinary action for failing to retain records or
8 other documentation of the acquisition and disposition of dangerous drugs and dangerous devices
9 in violation of Code sections 4105 subdivisions (b), (c), and (d), and 4333 subdivision (a), by and
10 through Code section 4301, subdivision (o), in that Respondent Maravich failed to maintain
11 records of the acquisition and disposition of dangerous drugs for at least three years from the date
12 of making in a site licensed by the Board, and failing to maintain electronic records in a manner
13 which allows a pharmacist on duty or pharmacist-in-charge to produce a hard copy and electronic
14 copy of all records of acquisition or disposition or other drug or dispensing-related records, as set
15 forth in paragraphs 25 and 33, above.

16 **SEVENTH CAUSE FOR DISCIPLINE**

17 **(Unauthorized Disclosure Of Prescriptions -- Respondent Maravich)**

18 41. Respondent Maravich is subject to disciplinary action for disclosing prescription
19 information without authorization in violation of CCR section 1764, as it relates to Civil Code
20 section 56.10, in that Respondent Maravich left records of acquisition/disposition in the leased
21 space used for Respondent Hidden Valley after vacating that premises, which left patients'
22 medical information exposed and accessible to the building manager and anyone else who had
23 access to that space, as set forth in paragraphs 25 and 33, above.

24 **C. Respondent Odedra**

25 42. Respondent Odedra has been designated as an owner of Respondent Hidden Valley
26 Pharmacy. As an owner for Respondent Hidden Valley, Respondent Odera was responsible for
27 Respondent Hidden Valley's compliance with maintaining the records and inventory required by
28 Code section 4081 and Health and Safety Code section 11205.

1 **EIGHTH CAUSE FOR DISCIPLINE**

2 **(Failure to Retain Records of Dangerous Drugs on Licensed Premises**
3 **—Respondent Odedra)**

4 43. Respondent Odedra for failing to retain records or other documentation of the
5 acquisition and disposition of dangerous drugs and dangerous devices in violation of Code
6 sections 4105 subdivisions (b), (c), and (d), and 4333 subdivision (a), by and through Code
7 section 4301, subdivision (o), in that Respondent Odedra failed to maintain records of the
8 acquisition and disposition of dangerous drugs for at least three years from the date of making in
9 a site licensed by the Board, and failing to maintain electronic records in a manner which allows a
10 pharmacist on duty or pharmacist-in-charge to produce a hard copy and electronic copy of all
11 records of acquisition or disposition or other drug or dispensing-related records, as set forth in
12 paragraphs 25 and 33, above.

13 **MATTERS IN AGGRAVATION**

14 44. To determine the degree of penalty, if any, to be imposed on Respondent Hidden
15 Valley Pharmacy, Complainant alleges:

16 a. On or about November 16, 2017, the Board issued Citation No. CI 2016 72329
17 to Respondent Hidden Valley Pharmacy for violating Code sections 4105, subdivisions (b), (c),
18 and (d), 4333, subdivision (a), 4081, subdivision (a), and Health and Safety Code section 11179.
19 Respondent Hidden Valley Pharmacy did not appeal that Citation.

20 45. To determine the degree of penalty, if any, to be imposed on Respondent Maravich,
21 Complainant alleges:

22 a. On or about November 16, 2017, the Board issued Citation No. CI 2017 77540
23 to Respondent Maravich for violating Code sections 4105, subdivisions (b), (c), and (d), 4333,
24 subdivision (a), 4081, subdivision (a), and Health and Safety Code section 11179. Respondent
25 Maravich did not appeal that Citation.

26 46. To determine the degree of penalty, if any, to be imposed on Respondent Odedra,
27 Complainant alleges:

28 ///

a. On or about June 14, 2013, the Board entered into a Stipulated Settlement and Disciplinary Order for Public Reproval with Respondent Odedra for violating Code sections 4301, subdivisions (j) and (o), 4113, subdivision (c), and 4104, Health and Safety Code sections 11158, 11162.1, 11159.2, and 11167.5, and Code of Federal Regulations, title 21, section 1304.04(f).

OTHER MATTERS

47. Pursuant to Code section 4307, if discipline is imposed on Pharmacy Permit Number PHY 51432 issued to Maravich Enterprises LLC dba Hidden Valley Pharmacy, while Respondent Maravich has been a manager, administrator, owner, member, officer, director, associate, or partner, and had knowledge of or knowingly participated in any conduct for which the licensee was disciplined, then Respondent Maravich shall be prohibited from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee for five years if Pharmacy Permit Number PHY 51432 is placed on probation or until Pharmacy Permit Number PHY 51432 is reinstated if it is revoked.

48. Pursuant to Code section 4307, if discipline is imposed on Pharmacy Permit Number PHY 51432 issued to Maravich Enterprises LLC dba Hidden Valley Pharmacy, while Respondent Odedra has been a manager, administrator, owner, member, officer, director, associate, or partner, and had knowledge of or knowingly participated in any conduct for which the licensee was disciplined, then Respondent Odedra shall be prohibited from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee for five years if Pharmacy Permit Number PHY 51432 is placed on probation or until Pharmacy Permit Number PHY 51432 is reinstated if it is revoked.

PRA YER

WHEREFORE, Complainant requests that a hearing be held on the matters herein alleged, and that following the hearing, the Board of Pharmacy issue a decision:

1. Revoking or suspending Permit Number PHY 51432, issued to Maravich Enterprises LLC dba Hidden Valley Pharmacy, Michael Maravich;

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2. Revoking or suspending Registered Pharmacist License Number RPH 48738, issued to Michael Maravich;

3. Revoking or suspending Registered Pharmacist License Number RPH 43972, issued to Harish R. Odedra;

4. Prohibiting Michael Maravich from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee for five years if Pharmacy Permit Number PHY 51432 is placed on probation or until Pharmacy Permit Number 51432 is reinstated if Pharmacy Permit Number 51432 issued to Maravich Enterprises LLC dba Hidden Valley Pharmacy, Michael Maravich is revoked;

5. Prohibiting Harish R. Odedra from serving as a manager, administrator, owner, member, officer, director, associate, or partner of a licensee for five years if Pharmacy Permit Number PHY 51432 is placed on probation or until Pharmacy Permit Number 51432 is reinstated if Pharmacy Permit Number 51432 issued to Maravich Enterprises LLC dba Hidden Valley Pharmacy, Michael Maravich is revoked;

6. Ordering Hidden Valley Pharmacy, Michael Maravich, and Harish R. Odedra to pay the Board of Pharmacy the reasonable costs of the investigation and enforcement of this case, pursuant to Business and Professions Code section 125.3; and,

7. Taking such other and further action as deemed necessary and proper.

DATED: February 22, 2019



ANNE SODERGREN
Interim Executive Officer
Board of Pharmacy
Department of Consumer Affairs
State of California
Complainant

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