

## California State Board of Pharmacy 2720 Gateway Oaks Drive, Ste 100 Sacramento, CA 95833

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To: Board Members

Subject: Agenda Item XVI. Executive Officer Report

## Business, Consumer Services and Housing Agency Department of Consumer Affairs Gavin Newsom, Governor

#### a. Sunset Review

On December 2, 2019, the Board submitted its <u>Sunset Review Report</u>. Following a delay in oversight hearings caused by the COVID-19 pandemic, on December 1, 2020, the Board submitted a <u>supplemental report</u> providing updated information as well as information on the Board's COVID-19 response. Following oversight hearings, legislation was passed extending the Board until January 1, 2026.

It is anticipated that the Board's next report will be due either late in 2024 or early 2025. Consistent with the Board's request to monitor progress on the legislation report, staff have prepared the annual update to various portions of the anticipated survey questions. As the work of the Board continues, new issues arising, changes in law occurring and operations changing it is anticipated that the report will change significantly. Although a deadline has not been provided, it is anticipated that the Board Sunset Report will be due the end of 2024 calendar year. It is recommended that members as part of committee meetings, identify potential new issues to raise as part of its legislative report. **Attachment 1** includes portions of the questionnaire generally used by the oversight committees. This information will ultimately be included in the Board's next Sunset Report.

## b. <u>Biannual Report of the California Practice Standards and Jurisprudence</u> <u>Examination for Pharmacists (CPJE) and the North American Pharmacist</u> <u>Licensure Examination (NAPLEX)</u>

Twice a year the Board publishes a report on the pass rates for the CPJE and NAPLEX exams. This report is currently be compiled and will be released as soon as the information is available. A verbal update will be provided during the Board meeting if new information is available.

## c. FDA Announcement: Drug Supply Chain Security Act Compliance Policies Establish 1-year Stabilization Period for Implementing Electronic Systems

August 20, 2023, the FDA <u>announced</u> two compliance policy guidance documents establishing a 1-year stabilization period to accommodate additional time for trading partners in the pharmaceutical supply chain.

As part of its announcement the FDA indicated that the "stabilization period is intended to avoid disruption to the supply chain and ensure continued patient access to drug products as trading partners work to fully implement the enhanced drug security requirements.

There are a number of <u>resources</u> available to assist licensees with understanding the requirements of, and implementation strategies for meeting the requirements for the DSCSA. Under a separate agenda item members and stakeholders will receive a presentation on DSCSA implementation activities.

## d. <u>Drug Enforcement Administration (CEA) Announcement: Revised</u> <u>Regulation Allows DEA-Registered Pharmacies to Transfer Electronic</u> <u>Prescriptions at a Patient's Requests</u>

September 1, 2023, the DEA released <u>information</u> about revised regulations that will facilitate at the request of the patient, the ability for a DEA-registered retail pharmacy to transfer an electronic prescription for a controlled substance to another DEA-registered retail pharmacy.

The revised <u>regulation</u> went into effect August 28, 2023.

#### e. Update on Business Modernization Activities

Business Modernization is a process the Board must undertake to determine what, if any changes are appropriate to systems used by the Board to support licensing and enforcement related activities. The process involves a number of activities that must be performed to guide the process and ultimately support any outcomes reached.

Business modernization activities include working with the Department of Consumer Affairs Organizational Improvement Office to develop prerequisite process mapping and functional requirements. These activities provide Boards with an opportunity to clarify business rules while also identifying future needs to an information technology platform. Several activities comprise these efforts including the development of process mapping documenting the Board's current processes, as well as could-be mapping that offers recommendations for process to be reengineered through new systems, online processing and removal of outdated or unnecessary steps. Following these mapping activities, functional requirements are identified to capture all system needs and requirements.

The business modernization process follows California Department of Technology PAL process. The PAL process involves includes four stages: 1) Business Analysis, 2) Alternatives Analysis, 3) Solution Development, 4) Project Readiness and Approval.

The Board has completed all process mapping and finalized its functional requirements document. It is anticipated the new system will have the ability to accept applications, supporting documents, and payments online as well as provide a resource for applicants to monitor the status of their application. It is hopeful the system will also have a means for licensees to manage renewals online, update addresses and submit other required documents. The Board is also exploring innovative options such as potential use of digital licenses.

### f. <u>Medical Board of California 2023 Guidelines for Prescribing Controlled</u> <u>Substances for Pain</u>

The Medical Board of California recently updated its <u>guidelines</u> for prescribing controlled substances for pain. These guidelines can serve as a helpful tool to pharmacists when exercising corresponding responsibility. The Medical Board has established an email for questions or comments, <u>PrescribingGuidelines@mbc.ca.gov</u>.

## **Attachment 1**

# Board of Pharmacy BACKGROUND INFORMATION AND OVERVIEW OF THE CURRENT REGULATORY PROGRAM

## **Interim Update October 2023**

#### Section 1 -

**Background and Description of the Board and Regulated Profession** 

The Board comprises 13 members: seven pharmacists and six public representatives. The Senate Rules Committee and the Speaker of the Assembly each appoint one public member. The other 11 members are appointed by the Governor.

- Seung Oh, President, Licensee Member
- o Jessica Crowley, Vice President, Licensee Member
- Trevor Chandler, Treasurer, Licensee Member
- o Renee Armendariz Barker, Licensee Member
- Indira J Cameron-Banks, Public Member
- o Trevor Chandler, Public Member
- Jessica Crowley, Licensee Member
- o Jose De La Paz, Public Member
- Kartikeya Jha, Licensee Member
- Jignesh Patel, Licensee Member
- Maria Serpa, Licensee Member
- o Nicole Thibeau, Licensee Member
- o Jason Weisz, Public Member
- Vacant, Public Member
- Vacant, Public Member

#### Board Committees and their Functions

The Board performs much of its work in committees. These committees develop and recommend policies that advance mission-related goals in the Board's strategic plan. The Board discusses, modifies and acts upon committee recommendations at public meetings. In addition to standing committees, the Board has temporary task force or ad hoc committees and one specialized standing committee.

The Board's strategic plan establishes five standing committees. The Board manages, plans, and tracks its operations through its strategic plan, which is annually updated and fully reassessed about every five years. The current plan was established in 2021. Committee memberships are periodically updated in part because of Board membership changes.

### **Licensing Committee**

This committee oversees the professional qualifications of licensees entering the practice of pharmacy, establishes minimum standards for Board-licensed facilities, and ensures appropriate practice standards.

#### Current members:

Seung Oh, Chairperson, Licensee Member

Jignesh Patel, Vice-Chairperson, Licensee Member

Renee Barker, Licensee Member

Trevor Chandler, Public Member

Jessica Crowley, Licensee Member

Jason Weisz, Public Member

## **Enforcement and Compounding Committee**

This committee exercises oversight of all drug distribution and dispensing activities – including drug compounding – and enforcement of state and federal pharmacy laws.

#### Current members:

Maria Serpa, Chair, Licensee Member

Renee Barker, Vice-Chair, Licensee Member

Renee Barker, Licensee Member

Indira Cameron-Banks, Public Member

Jignesh Patel, Licensee Member

#### Communication and Public Education Committee

This committee is responsible for outreach and information for consumers, including the importance of discussing medications with their pharmacists, patients complying with their prescription treatment regimens, and becoming better informed about drug therapy and health. The committee also ensures development of educational materials for licensees regarding new laws, Board policies, and emerging issues.

#### Current members:

Jason Weisz, Chair, Public Member

Nicole Thibeau, Vice-Chair, Licensee Member

Renee Barker, Licensee Member

Jose De La Paz, Public Member

Kartikeya Jha, Licensee Member

## Legislation and Regulation Committee

This committee advocates legislation and promulgates regulations that advance the Board's vision and mission.

#### Current members:

Jessica Crowley, Chair, Licensee Member

Jose De La Paz, Vice-Chair, Public Member

Trevor Chandler, Public Member

Kartikeya Jha, Licensee Member

Maria Serpa, Licensee Member

Nicole Thibeau, Licensee Member

## Organizational Development Committee

This Board president and vice president are the only members of this committee, which typically does not meet in public. The committee is responsible for strategic planning, budget management, and staff development activities. The committee reports on the Board's expenditures, revenue, and fund condition at quarterly Board meetings.

#### Current members:

Jessica Crowley, Vice President, Licensee Member

Board member attendance is reported quarterly. Board and Committee Member Roster to be provided as part of the final report. Outcomes from the Medication Error Reduction and Workforce and Standard of Care Ad Hoc Committees will also be highlighted in final report. A chart detailing the licensing programs, authority and brief description will also be provided.

## Meeting Quorums

Business and Professions Code section 4002 requires the presence of seven Board members to take action at meetings. In August 2023, the Board had cancelled one meeting due to lack of a quorum. Further, there have been two instances where the Board was unable to secure a quorum; however, in both instances a Committee of the Board proceeded consistent with BPC 4309(c).

Fiscal Year	Number of Board Meetings	Board Meeting Days	Committee Meetings
FY 2020/21	11	15	15
FY 2021/22	10	14	16
FY 2022/23	11	15	24
Total	32	44	55

## **Major Changes**

## Strategic Plan

In 2021 the Board completed development of a new strategic plan. The plan was a joint effort between Board members, staff, and the public to identify key issues and establish strategic objectives. As part of its process, the Board leveraged its prior strategic plan and analyzed trends in pharmacy practice, consumer needs and health care. The Board's vision statement, "Healthy Californians through safe, quality pharmacist care" remains relevant and reflects how the Board establishes its priorities and policies.

## **Board Membership**

The Board has several new members. Except for one member currently serving their year of grace, the longest serving member was appointed in 2018.

## Board-Sponsored Legislation and Legislation Affecting the Board

#### 2021 Legislation

#### **Board Sponsored**

• SB 409 (Chapter 604, Statutes of 2021) Pharmacy Practice: Testing

#### **Enacted Legislation Impacting the Board**

- AB 107 (Chapter 639, Statutes of 2021) Licensure: Veterans and Military Spouses
- AB 527 (Chapter 618, Statutes of 2021) Controlled Substances. (Included Board-sponsored provisions)
- AB 1064 (Chapter 655, Statutes of 2021) Pharmacy Practice: Vaccines: Independent Initiation and Administration
- AB 1533 (Chapter 629, Statutes of 2021) included numerous Board-sponsored provisions as part of the Sunset Review Process
- SB 306 (Chapter 486, Statutes of 2021) Sexually Transmitted Disease: Testing
- SB 310 (Chapter 541, Statutes of 2021) Unused Medications: Cancer Medication Recycling
- SB 311 (Chapter 384, Statutes of 2021) Compassionate Access to Medical Cannabis Act or Ryan's Law
- SB 362 (Chapter 334, Statutes of 2021) Chain Community Pharmacies: Quotas

#### 2022 Legislation

#### **Board Sponsored**

• The Board did not sponsor legislation.

#### **Enacted Legislation Impacting the Board**

- AB 852 (Chapter 518, Statutes of 2022) Health Care Practitioners: Electronic Prescriptions (Included Board-sponsored provision.)
- AB 2194 (Chapter 958, Statutes of 2022) Pharmacists and Technicians: Continuing Education: Cultural Competency
- SB 731 (Chapter 841, Statutes of 2022) Criminal Records: Relief
- SB 872 (Chapter 220, Statutes of 2022) Pharmacies: Mobile Units
- SB 988 (Chapter 988, Statutes of 2022) Compassionate Access to Medical Cannabis Act or Ryan's Law
- SB 1259 (Chapter 245, Statutes of 2022) Pharmacists: Furnishing Opioid Antagonists
- SB 1346 (Chapter 384, Statutes of 2021) Surplus Medication Collection and Distribution

#### 2023 Legislation

#### **Board Sponsored**

- AB 1286 (Chapter 470, Statutes of 2023) Pharmacy
- AB 1557 (Chapter 141, Statutes of 2023) Pharmacy: Electronic Prescriptions
- SB 816 (Chapter 723, Statutes of 2023) Professions and Vocations
- SB 887 (Chapter 510, Statutes of 2023) Consumer Affairs

#### **Enacted Legislation Impacting the Board**

- AB 317 (Chapter 322, Statutes of 2023) Pharmacist Service Coverage
- AB 663 (Chapter 539, Statutes of 2023) Pharmacy: Mobile Units

- AB 1341 (Chapter 276, Statutes of 2023) Public Health: COVID-19 Testing and Dispensing Sites: Oral Therapeutics
- SB 345 (Chapter 260, Statutes of 2023) Health Care Services: Legally Protected Health Care Services
- SB 544 (Chapter 216, Statutes of 2023) Bagley-Keene Open Meetings Act: Teleconferencing

## **Regulation Changes**

#### 2021 Regulation Changes

• Amend Section 1780, 1781, 1782, and 1782 – Drug Distributors

Effective Date: April 1, 2021

• Amend Section 1747 - HIV Preexposure and Postexposure Prophylaxis Furnishing

Effective Date: June 8, 2021

• Amend Sections 1702, 1702.1, 1702.2, 1702.5 – Renewal Requirements

Effective Date: July 1, 2020

• Amend 1707 – Off-site Storage

Effective: July 1, 2021

• Add Section 1711, 1713, and 1715.1 – Automated Drug Delivery Systems

Effective Date: July 1, 2021

#### 2022 Regulation Changes

 Amend Section 1746.4 – Administering Vaccines Effective January 25, 2022

- Amend Section 1709 Ownership, Management & Control of Business Entity Effective April 1, 2022
- Amend Section 1704 Address Change Notification Effective April 1, 2022
- Amend Section 1715.6 Reporting Drug Loss Effective April 1, 2022
- Amend Sections 1715.5 Automatic Refill Programs

Effective Date: July 1, 2022

• Amend Section 1708.2 – Notification of Temporary Closure

Effective October 1, 2022

• Amend Section 1715 – Pharmacy/Hospital Self-Assessment Forms

Effective October 1, 2022

Amend Section 1784 – Wholesaler/3PL Self-Assessment Form

Effective October 1, 2022

#### 2023 Regulation Changes

- Amend Sections 1793.5 and 1793.6 and Add Section 1793.65 Pharmacy Technicians Effective January 1, 2023
- Amend Section 1715.65 Inventory Reconciliation Effective January 1, 2023
- Amend Section 1735.2 Compounding Self-Assessment

Pending regulations will be compiled at the end of the full reporting period.

## **Major Studies**

The Board contracted with the Office of Professional Examination Services to conducts of the California Practice Standards and Jurisprudence Examination for Pharmacists (CPJE), the North American Pharmacist Licensure Examination (NAPLEX), and the Multistate Pharmacy Jurisprudence Examination (MPJE).

The Board contracted with Capital Accounting Partners, LLC to conduct an independent audit of the Board's fees.

#### **National Associations**

The board is a member of the National Association of Boards of Pharmacy. As a full member, the board has one vote in matters before the association.

Meetings of National Associations Attended:

- NABP 117th Annual Meeting (May 2021) Virtual Event
- NABP 118th Annual Meeting (May 2022) Arizona
- NABP 119<sup>th</sup> Annual Meeting (May 2023) Tennessee

#### National Fxam Involvement

The board does not have specific representation on the national exam committee. However, former members of the Competency Committee (which develops the California exam) participate in the scoring and analysis of the NAPLEX. The board is otherwise not involved.

#### Section 2 -

#### **Performance Measures and Customer Satisfaction Surveys**

Performance measures and customer satisfaction surveys are saved and will be formatted for the final report.

#### Section 3 -

#### **Fiscal and Staff**

### **Fund Appropriation**

Business and Professions Code section 4406 provides that all fees collected on behalf of the Board and all receipts of every kind and nature shall be credited to the Pharmacy Board Contingent Fund, which is created in this section. The contingent fund shall be available, upon appropriation of the Legislature for use of the Board.

Board Senate Bill 212 (Jackson, Chapter 1002, Statutes of 2018), established the Pharmaceutical and Sharps Stewardship Fund, and provided provisions for the Board to seek reimbursement from the fund for purposes of administering and enforcing the measure.

## Reserve Level/Spending

Business and Professions Code section 4400(p), provides that it is the intent of the Legislature that, in setting fees, the Board shall seek to maintain a reserve in its fund equal to approximately one year's operating expenditure. The Board is currently significantly below this level. At the end of fiscal year 2022/23, the Board's reserve level is at 5.6 months, which is about \$16,489,000.

	FY	FY	FY	FY	FY	FY
Fund Condition	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Fund Balance	10,177	13,847	16,489	14,067	13,069	9,202
Months in Reserve	4.1	5.1	5.6	4.6	4.3	3.0

#### **Future Fee Increases**

In 2021, the Board recently secured an independent fee analysis. The analysis concluded that the Board is not fully recovering its costs. The auditors noted the need for the Board to create a culture of sustainability and offered several recommendations including:

- 1. Adopt and implement the fees recommended by the Board Leadership.
- 2. Regular adjustment of fees.
- 3. Set the fee caps for a ten-year forward projection.

Consistent with the findings of the audit, the Board recast its fees in Senate Bill 816 (Chapter 723, Statutes 2023). The new fees become effective January 1, 2025.

As part of this recasting of the Board's fees, several license types will see a reduction in fees or no change in their existing fees. Other fees will be increased effective January 1, 2025, with new minimum and maximum fees established consistent with the findings of the independent audit.

### **General Fund Loans**

The Board loaned \$2.4M to the general fund in FY 2019/20. More recently as part of the Governor's 2022-23 May Revision, the Board's allocated share of \$1.258M was provided to the general fund.

Table 2. Fund Condition						
	FY	FY	FY	FY	FY	
(Dollars in Thousands)	2020/21	2021/22	2022/23	2023/24	2024/25	
	2020/21	2021/22	estimate	estimate	estimate	
Beginning Balance	\$ 8,890	\$ 10,177	\$ 13,847	\$ 16,489	\$ 14,067	
Revenues and Transfers	\$ 32,992	\$ 34,420	\$ 35,131	\$ 32,977	\$ 35,389	
Total Revenue	\$ 41,882	\$ 43,869	\$ 48,978	\$ 49,466	\$ 49,456	
Budget Authority	\$ 28,877	\$ 30,604	\$ 31,375	\$ 32,924	\$ 36,386	
Expenditures	\$ 26,102	\$ 27,483	\$ 31,366	\$ 33,175	\$ 36,386	
Loans/Transfer to						
General Fund	\$ 2,400	\$1,258	-	ı	ı	
Accrued Interest, Loans						
to General Fund	\$ -	\$ -	-	ı	ı	
Loans Repaid From					\$	
General Fund	\$ -	\$ -	\$ -	\$ -	2,400	\$
Fund Balance	\$10,177	\$13,847	\$ 16,489	\$ 14,067	\$ 15,470	Pending
Months in Reserve	4.1	5.1	5.6	4.6	5.3	Pending

Table 3. Expe	Table 3. Expenditures by Program Component       (list dollars in thousands)										
Т	FY 20	20/21	FY 20	21/22	FY 20	22/23	FY 202	FY 2023/24			
	Personne I Services	OE&E	Personne I Services	OE&E	Personnel Services	OE&E	Personne I Services	OE&E			
Enforcemen											
t	10,981	6,328	12,323	5,560	14,186	6,467					
Examination	129	146	137	202							
Licensing	3,539	433	4,092	476	3,404	543					
Administrati											
on *	1,894	224	2,145	254	2,634	388					
DCA Pro											
Rata	-	3,661	-	3,985		3,742					

Diversion (if									
applicable)	171	202	168	181					
TOTALS	\$ 16,714	\$ 10,994	\$18,865	\$10,658	\$20,224	\$11,141			
*Administration includes costs for executive staff, hoard, administrative support, and fiscal services									

Fee	Current Fee Amount	Statutory Limit	FY 2019/20 Revenue	FY 2020/21 Revenue	FY 2021/22 Revenue	FY 2022/23 Revenue	% of Total Revenue
	,						
Advanced Practice Pharmacist	\$300	\$300	59	50	40	51	0.11%
Designated Representative (EXC)	\$210	\$210	55	93	81	98	0.23%
Designated Representative (EXV)	\$210	\$210	1	1	0	1	0.00%
Designated Representative Third-Party Logistics							
Provider (3PL) Designated	\$210	\$210	0	0	1	30	0.00%
Representative Reverse Distributor (DRL) Designated	\$210	\$210	13	21	23	0	0.07%
Paramedic	\$140	\$140	0	0	0	0	0.00%
Intern Pharmacist	\$230	\$230	338	410	390	304	1.15%
Pharmacist Exam	\$285	\$285	664	655	608	566	1.79%
Pharmacist Exam Retake	\$285	\$285	286	397	432	321	1.27%
Pharmacist Licensure	\$215	\$215	367	428	360	387	1.06%
Pharmacy Technician	\$195	\$195	641	921	1,059	1,069	3.11%
240D Cl' - ' -	Γ	Γ				Γ	
340B Clinic Automated Patient							
Dispensing System	\$300	\$500	0	0	1	0	0.00%
Automated Patient Dispensing System	<b>\$300</b>	<b>6350</b>	2	0	0		0.000/
(APDS) Automated Unit	\$200	\$250	2	0	0	0	0.00%
Dispensing System (AUDS)	\$200	\$250	157	43	45	77	1.32%
Centralized Hospital	4.	4.					
Packaging	\$1,150	\$1,150	0	1	1	0	0.00%
Clinic Permit Correctional Automated Drug	\$570	\$570	62	59	68	151	0.20%
Delivery System (ADDS)	\$200	\$250	0	0	0	0	0.00%

Correctional Clinic	\$570	\$570	0	0	0	0	0.00%
EMS Automated Drug							
Delivery System	\$100	\$100	0	0	0	0	0.00%
Hospital Pharmacy	\$570	\$570	14	15	17	8	0.05%
Hospital Satellite							
Compounding							
Pharmacy	\$2,305	\$2,305	3	0	0	0	0.00%
Hypodermic Needle	\$240	\$240	1	3	2	1	0.01%
*Government-Owned Clinic	\$570	\$570	0	0	20	19	0.06%
*Government-Owned							
Hospital Pharmacy	\$570	\$570	0	0	0	0	0.00%
*Government-Owned							
Hypodermic Needle	\$240	\$240	0	0	0	0	0.00%
*Government-Owned							
Pharmacy	\$570	\$570	0	0	1	1	0.00%
*Government-Owned							
Sterile Compounding	\$2,305	\$2,305	0	0	12	0	0.04%
Nonresident Third-Party							
Logistics Provider	\$820	\$820	16	31	25	33	0.07%
Nonresident Pharmacy	\$570	\$570	60	77	82	60	0.23%
Nonresident Outsourcing							
Facility	\$3,335	\$3,335	26	27	10	36	0.03%
Nonresident Sterile							
Compounding	\$3,335	\$3,335	31	42	40	50	0.12%
Nonresident Wholesaler							
(OSD)	\$820	\$820	78	91	81	99	0.24%
Nonresident Wholesaler							
21+ Facilities	\$820	\$820	0	0	0	0	0.00%
Outsourcing Facility	\$3,180	\$3,180	3	0	0	6	0.00%
Pharmacy	\$570	\$570	188	200	211	207	0.62%
Drug Room	\$570	\$570	n/a	2	0	0	0.00%
Remote Dispense Site							
Pharmacy	\$570	\$570	2	2	1	0	0.00%
Sterile Compounding	\$2,305	\$2,305	171	199	133	1290	0.39%
Third-Party Logistics							
Provider	\$820	\$820	8	9	7	3	0.02%
Vet Food-Animal Drug							
Retailer	\$610	\$610	0	0	1	1	0.00%
Wholesaler Drug	\$820	\$820	44	52	38	47	0.11%
Wholesaler w/more 21+							
facilities	\$820	\$820	0	0	0	0	0.00%
Wholesaler Emergency							
Medical Service Provider	\$780	\$780	0	0	0	0	0.00%
		Miscella	neous Fees				

Change of Address/ Trade style Name							
(Facility Only)							
(	\$45	\$45	11	6	9	2	0.03%
Change of Designated	· ·	· ·					
Representative in							
Charge	\$130	\$30	16	18	20	23	0.06%
Change of Pharmacist in							
Charge	\$130	\$130	201	243	341	318	1.00%
Change of Responsible							
Manager	\$130	\$130	3	3	4	3	0.01%
Change of Permit	\$130	\$130	106	111	250	268	0.74%
Duplicate/Replacement							
Certificate	\$45	\$45	62	62	61	71	0.18%
Evaluation of Continuing	\$40 per	\$40 per					
Education Courses	hour	hour	0	0	0	0	0.00%
Regrade of Pharmacist							
Examination	\$115	\$115	0	2	2	1	0.01%
Retired Pharmacist		,					
License	\$45	\$45	9	13	15	11	0.04%
Transfer of Intern Hours/	400	400					
License Verification	\$30	\$30	22	25	22	20	0.06%
C II IN	<u> </u>	Temporar	y License Fe	ees			
Correctional Pharmacy	¢225	Ċ	0	0	0	0	0.000/
Permit Temporary *Government-Owned	\$325	\$325	0	0	0	0	0.00%
Hospital Pharmacy							
Temporary Permit	\$325	\$325	0	0	0	0	0.00%
Hospital Temporary	7323	7323	U	0	0	0	0.0070
Permit	\$325	\$325	8	9	10	3	0.03%
Hospital Satellite	7323	<b>Ψ323</b>			10	3	0.0370
Compound Pharmacy							
Temporary Permit	\$715	\$715	0	0	0	0	0.00%
Nonresident Pharmacy	, -	, -					
Temporary Permit	\$325	\$325	25	31	32	20	0.09%
Drug Room Temporary							
Permit	\$325	\$325	n/a	1	0	0	0.00%
Nonresident Outsourcing							
Facility Temporary Permit	\$715	\$715	4	3	0	3	0.00%
Nonresident Sterile							
Compounding Temporary							
Permit	\$715	\$715	3	4	6	7	0.02%
Nonresident Third-Party							
Logistics Provider							
Temporary Permit	\$715	\$715	6	17	8	7	0.02%
Nonresident Wholesaler							
Temporary Permit	\$715	\$715	27	24	28	42	0.08%

Pharmacy Temporary		İ					
Permit	\$325	\$325	83	85	95	90	0.28%
Outsourcing Facility							
Temporary Permit	\$715	\$715	0	0	0	1	0.00%
Remote Dispensing Site							
Pharmacy Temporary							
Permit	\$325	\$325	0	0	0	0	0.00%
*Government-Owned							
Sterile Compounding							
Temporary Permit	\$715	\$715	0	0	1	0	0.00%
Sterile Compounding							
Temporary Permit	\$715	\$715	27	36	32	18	0.09%
Third-Party Logistics							
Provider Temporary	6745	6745	2	4	2	2	0.040/
Permit	\$715	\$715	3	4	2	2	0.01%
Vet Food-Animal Drug	¢2E0	¢2E0		0	0	0	0.000/
Retailer Temporary Permit	\$250	\$250	0	0	0	0	0.00%
Wholesaler Temporary Permit	\$715	\$715	19	23	16	18	0.04%
remit	\$/15		ewal Fees	25	10	10	0.04/0
Biennial		Nerie	warrees				
Advanced Practice							
Pharmacist	\$300	\$300	81	134	126	158	0.37%
Pharmacist License	\$505	\$505	8,074	10,684	11,104	11,015	32.66%
Pharmacy Technician	\$195	\$195	4,366	5,867	5,502	5,652	16.18%
Annual	<b>V</b> 233	Ψ233	1,555	3,007	3,302	3,002	2012070
Designated Representative							
(EXC)	\$300	\$300	562	732	723	701	2.13%
Designated Representative	-	·					
(EXV)	\$300	\$300	14	16	15	15	0.04%
Designated Representative							
Third-Party Logistics							
Provider (3PL)	\$300	\$300	53	88	97	98	0.29%
Designated Representative							
Reverse Distributor (DRR)	\$300	\$300	0	0	1	1	0.00%
340B Clinic Automated							
Patient Dispensing System	\$300	\$500	0	0	0	0	0.00%
Automated Patient Delivery							
System	\$200	\$250	0	0	0	0	0.00%
Automated Unit Dispensing	4222	4050	400	4=0	474	100	0 = 40/
System	\$200	\$250	123	173	174	180	0.51%
Centralized Hospital	64.435	64.435			_	40	0.030/
Packaging	\$1,125	\$1,125	6	8	720	10	0.03%
Clinic Permit+	\$360	\$360	348	417	729	746	2.14%
Correctional Automatic	6300	¢3F0		0	0	0	0.000/
Dispensing System	\$200	\$250	0	0	0	0	0.00%
Correctional Pharmacy	\$930	\$930	n/a	0	53	53	0.16%

Drug Room+	\$930	\$930	n/a	8	18	13	0.05%
Exempt Hospital							
Pharmacy	\$930	\$930	1	n/a	n/a	n/a	n/a
Correctional Clinic	\$360	\$360	0	0	0	0	0.00%
EMS Automated Drug							
Delivery System	\$100	\$100	0	0	0	0	0.00%
Government-Owned							
Centralized Hospital							
Packaging	\$1,125	\$1,125	n/a	2	2	2	0.01%
Hospital Pharmacy+	\$930	\$930	32	182	268	257	0.79%
Hospital Satellite							
Compounding Pharmacy	\$1,855	\$1,855	3	7	11	11	0.03%
Hypodermic Needle+	\$280	\$280	52	66	65	61	0.19%
Nonresident Third-Party							
Logistics Provider	\$820	\$820	43	63	77	88	0.23%
Nonresident Pharmacy	\$930	\$930	339	458	450	469	1.32%
Nonresident Outsourcing							
Facility	\$3,180	\$3,180	42	70	60	54	0.18%
Nonresident Sterile							
Compounding	\$3,180	\$3,180	153	186	181	159	0.53%
Nonresident Wholesaler							
(OSD)	\$820	\$820	485	558	562	570	1.65%
Outsourcing Facility	\$1,855	\$1,855	7	6	7	5	0.02%
Pharmacy+	\$930	\$930	4,870	5,925	6,022	5,891	17.71%
Remote Dispense Site							
Pharmacy	\$930	\$930	0	1	1	1	0.00%
Sterile Compounding+	\$1,855	\$1,855	942	1,280	1,501	1,459	4.41%
Third-Party Logistics						·	
Provider	\$820	\$820	17	21	25	26	0.07%
Vet Food-Animal Drug							
Retailer	\$460	\$460	7	9	8	7	0.02%
Wholesaler Drug+	\$820	\$820	333	366	363	341	1.07%
Wholesaler Emergency							
Medical Services Provider	\$780	\$780	0	0	0	0	0.00%
		Renewal D	elinquency I	Fees			
Biennial							
Advanced Practice							
Pharmacist	\$150	\$150	1	1	2	0	0.01%
Pharmacist License	\$150	\$150	43	50	58	56	0.17%
Pharmacy Technician	\$97.50	\$97.50	122	118	127	147	0.37%
Annual	· ·	<del>-</del>					
Designated Representative							
(EXC)	\$150	\$150	17	26	20	15	0.06%
Designated Representative	,			-	-	-	
(EXV)	\$150	\$150	1	0	0	0	0.00%

Designated Representative Third-Party Logistics							
Provider (3PL)	\$150	\$150	2	2	2	1	0.01%
Designated Representative	7130	7130			_	_	0.0170
Reverse Distributor (DRR)	\$150	\$150	0	0	0	0	0.00%
Designated Paramedic	\$65	\$65	0	0	0	0	0.00%
Drug Room	\$150	\$150	n/a	0	0	0	0.00%
340B Clinic Automated	Ψ130	<b>V</b> 230	, ω				0.0070
Patient Dispensing System	\$150	\$150	0	0	0	0	0.00%
Automated Drug Delivery	7 - 5 5	7-55				_	0.007.
System	\$100	\$100	0	1	0	2	0.00%
Centralized Hospital							
Packaging .	\$150	\$150	0	0	0	0	0.00%
Clinic Permit+	\$150	\$150	12	15	25	20	0.07%
Correctional Automatic							
Dispensing System	\$100	\$100	0	0	0	0	0.00%
Correctional Clinic	\$150	\$150	0	0	0	0	0.00%
Exempt Hospital Pharmacy	\$150	\$150	0	n/a	n/a	n/a	n/a
EMS Automated Drug							
Delivery System	\$35	\$35	0	0	0	0	0.00%
Government Owned							
Centralized Hospital							
Packaging	\$150	\$150	n/a	0	0	0	0.00%
Hospital+	\$150	\$150	0	0	0	0	0.00%
Hospital Satellite							
Compounding Pharmacy	\$150	\$150	0	0	0	0	0.00%
Hypodermic Needle+	\$150	\$150	3	2	4	4	0.01%
Nonresident Third-Party							
Logistics Provider	\$150	\$150	0	1	0	0	0.00%
Nonresident Pharmacy	\$150	\$150	3	1	3	1	0.01%
Nonresident Outsourcing							
Facility	\$150	\$150	0	0	0	1	0.00%
Nonresident Sterile							
Compounding	\$150	\$150	0	0	0	0	0.00%
Nonresident Wholesaler							
(OSD)	\$150	\$150	4	7	5	3	0.01%
Outsourcing Facility	\$150	\$150	0	0	0	0	0.00%
Pharmacy+	\$150	\$150	4	4	6	2	0.02%
Remote Dispensing Site				_	_		
Pharmacy	\$150	\$150	0	0	0	0	0.00%
Sterile Compounding+	\$150	\$150	0	1	1	1	0.00%
Third-Party Logistics	4	4	_	_	_	-	
Provider	\$150	\$150	0	0	0	0	0.00%
Vet Food-Animal Drug	6450	64.50	_	_	_		0.0007
Retailer	\$150	\$150	0	0	0	0	0.00%
Wholesaler Drug+	\$150	\$150	2	3	7	2	0.02%

Wholesaler Emergency							
Medical Service Provider	\$150	\$150	0	0	0	0	0.00%

- \*Government-Owned facilities were previously named Exempt facilities. Data did not change from previous Sunset Report, only a name change for these license types has occurred.
- +Includes Government-Owned facilities renewal fees.
- FY 20/21 Figures based on Revenue Month 13 Fi\$Cal Report.
- FY 21/22 Figures based on Revenue Month 13 Fi\$Cal Report.

Table 5. Bud	lget Chang	e Proposals (BCPs)							
				Personnel Serv	ices		OE&E		
BCP ID#	Fiscal Year	Description of Purpose of BCP	# Staff Requested (include classification)	# Staff Approved (include classification)	\$ Requested	\$ Approved	\$ Requested	\$ Approved	
1111-001	2019	Business Modernization	2.0 LT AGPAs	2.0 LT AGPAs	\$248	\$248	\$50	\$50	
1111-002	2019	Enforcement Unit (Probation)	2.0 AGPAs	2.0 AGPAs	\$248	\$248	\$50	\$50	
1111-013	2019	AB 2037 – 340B ADDS and SB 1447 – ADDS	1.5 Inspectors 1.0 AGPA	1.5 Inspectors 1.0 AGPA	\$388	\$388	\$70	\$70	
1111-038	2020	Enforcement Unit (Probation)	1.0 SSMI 1.0 OT (T)	1.0 SSMI 1.0 OT (T)	\$279	\$279	\$45	\$45	
1111-038	2020	Legislative and Admin Staff	1.0 SSMII	1.0 SSMII	\$186	\$186	\$25	\$25	
1111-038	2020	Compounding/Outsourcing	2.0 Inspectors 1.0 OA 1.0 OT (T)	2.0 Inspectors 1.0 OA 1.0 OT (T)	\$680	\$680	\$100	\$100	
1111-073	2022	Site Licensing Staff	2.0 AGPAs	2.0 AGPAs	\$248	\$248	\$50	\$50	
1111-xxx	2022	SB 362 – Quotas, SB 340 – Cancer Med Recycle, AB 1533 – Standard of Care, AB 107 – Military Spouse Temp	1.0 Inspector, 1.0 LT AGPA, 0.5 AGPA	1.0 Inspector, 1.0 LT AGPA, 0.5 AGPA	\$365	\$365	\$76	\$76	
1111-xxx	2023	SB 1346 – Surplus Med	0.5 Inspector	0.5 Inspector	\$88	\$88	\$15	\$15	

## **Staffing Issues**

The board has 138.8 authorized positions, including 63 licensed pharmacists whose education and experience in various practice settings provide insight into investigations and potential risks to patients. Board inspectors can quickly assess practice environments for violations placing consumers at risk and also provide technical advice to licensees about compliance with state and federal laws. Since the beginning of the COVID-19 pandemic the Board has experienced some difficulties in filling vacancies.

Staff is encouraged to participate in the individual development process (IDP) to avail themselves of programs such as the department's upward mobility program and analyst certification program. To retain staff and expand its organizational knowledge, the board is currently working to reclassify appropriate analyst positions to interchangeable positions which will more easily allow staff to be promoted in place. In addition, the board provides cross training not only to expand staff knowledge but also to address succession planning. This reclassification and cross training has resulted in 5 non-pharmacist staff being promoted in place.

The board currently has the following vacancies:

• 1 Enforcement Chief (CEA)

- 4.5 Inspector positions
- 5 Licensing positions
- 1 Enforcement position
- 1 Administration position

The board strives for timely recruitment and onboarding of new employees as delays in filling vacancies create a backlog of work, resulting in unavoidable delays in board business activities. To expand our recruitment efforts the board occasionally posts high level management job openings beyond CalCareers to include other publications. The board has experienced recruitment challenges specific to the eligibility of applicants related to the State hiring examination process.

In August 2022 the Department of Consumer Affairs announced a departmental Executive Steering Committee whose purpose is to take actionable steps to embed diversity, equity and inclusion into the Department's framework and strategy. Likewise, the board is committed to diversity, equity, inclusion, and accessibility in carrying out its consumer protection mandate. Staff has updated all job postings to specifically state the importance the board places on these values to attract, develop and retain diverse talent and demonstrate value and respect for individuals and their uniqueness. Additionally, the board has updated our applicant screening process to remove personal identifying information from the initial screening of an application.

## Staff Development

The Board of Pharmacy encourages all staff members to participate in a wide variety of training to enhance their skill set. Staff members have been encouraged to participate in training virtually through Microsoft TEAMS, teleconferences, and other modes of learning that encourage social distancing. In FY 22/23, Board staff participated in 77 various training courses through the Department of Consumer Affairs training department, SOLID. These courses are offered to Board staff members at no cost. Courses can be as short as 30-minutes to 2-hours to help staff members enhance their skills in customer service, the Microsoft Suite, or courses for upward mobility in their career. The Board also spent \$16,030 on an additional 35 trainings for staff through outside vendors. These trainings included specialized trainings for managers and inspector staff.

This past fiscal year the Board experienced an increase in new staff joining the Board, which lead to an increase in the number of trainings attended and the number of participants. The Board also focused on employee training and development as we had several long-term staff retire. The Board wants to continue to grow talent from within and have staff promote internally, and this is accomplished through training and development.

	No. of Courses FY 20/21	No of Attendees FY 20/21	No. of Courses FY 21/22	No of Attendees FY 21/22	No. of Courses FY 22/23	No of Attendees FY 22/23	No. of Courses FY 23/24	No of Attendees FY 23/24
Department Provided Training	40	19	43	45	77	118		

External	7	8	7	26	16	35	
Vendor							
Training							
Internal	4	215	5	267	6	181	
Staff							
Training							

## Training Expenses (not including travel costs)

	FY 2020/2021	FY 2021/2022	FY 2022/23	FY 2023/24
External Vendor Training Costs	\$2,714	\$12,260	\$16,030	

## **Performance Target**

The Board publicly reports its performance at quarterly meetings. The Board established extremely aggressive targets that balance the Board's mandate to protect consumers with the needs of individuals and businesses entering the marketplace.

Regrettably, the Board has experienced challenges in meeting its performance measures for the majority of its site applications. This is in part due to staff vacancies and challenges with recruitment since fiscal year 2020/21. During fiscal year 2020/21 the board experienced an increase in the number of temporary applications as well as the complexity of ownership structures, primarily with entities seeking licensure as a pharmacy continues to change significantly.. The Board has successfully recruited the majority of its analyst positions this past fiscal year and continues recruitment efforts for its remaining positions. The Board continues to engage in business modernization activities which include evaluating processes for improvement. Ultimately replacing the Board's current application tracking system will streamline engagement with applicants.

From FY 2020/21 to FY 2021/22, the following applications had a reduction in processing times:

- Complete Applications
  - Clinic
  - Designated Representative -3PL
  - Designated Representative Wholesaler
  - Hospital
  - Intern Pharmacist
  - Pharmacy Technician
  - Third-Party Logistics Provider
- Incomplete Applications
  - Designated Representative -3PL
  - Designated Representative -Reverse Distributor
  - Drug Room
  - Designated Representative -Veterinary Food-Animal Drug Retailer
  - Designated Representative Wholesaler
  - Intern Pharmacist
  - Outsourcing Facility -Nonresident
  - Wholesaler

From FY 2021/22 to FY 22/23, the following applications had a reduction in processing times:

Complete Applications

- Intern Pharmacist
- Pharmacy-Nonresident
- o Incomplete Applications
  - Advanced Practice Pharmacist
  - Clinic
  - Hospital Pharmacy
  - Intern Pharmacist
  - Pharmacist Examination
  - Pharmacist Licensure
  - Pharmacy
  - Pharmacy Technician
  - Outsourcing Facility
  - Wholesaler-Nonresident

### Licenses or Registrations Denied Based on Criminal History

Over the last three years the board received 44,957 applications. The board issued over 28,332 licenses and denied 162 applications. The causes for denial vary based on the type of application. For example, an outsourcing application may be denied because the facility does not comply with current good manufacturing practices, while a pharmacist technician application may be denied for conviction of a crime the board has determined to be substantially related to the position.

#### **Application Denials**

	FY 2020/21	FY 2021/22	FY 2022/23A	FY 2023/24
Criminal Conviction	10	30	49	
Total Denial	33	55	74	

#### Categories of Convictions

	FY 2020/21	FY 2021/22	FY 2022/23A	FY 2023/24
Acts Involving Drugs/Alcohol	8	22	38	
Acts Involving Theft/Fraud	3	8	3	
Criminal Sexual Behavior	0	2	1	
Violent Crime	2	3	8	

Note: The data above includes convictions for all categories. If an applicant had a conviction in more than one of the above categories, both are reflected.

Provided below is some summary information for applications that were denied:

#### FY 2020/21

- Pharmacy Technician: The board denied eight (8) pharmacy technician applications, typically for one or more convictions of a crime substantially related to the functions of a pharmacy technician, including driving under the influence of alcohol, fraud, burglary, and possession of drug paraphernalia.
- Pharmacist: The board denied four (4) pharmacist applications based on prior license discipline and driving under the influence of alcohol.
- Intern Pharmacist: The board denied two (2) intern pharmacist applications based on criminal history substantially related to the functions of an intern pharmacist, including driving under the influence of alcohol and grand theft.

- Pharmacy: The board denied eleven (11) pharmacy applications primarily due to pending investigations of pharmacies with common ownership.
- Nonresident pharmacy: The board denied four (4) nonresident pharmacy applications primarily due to pending investigations of pharmacies with common ownership and unlicensed activity.
- Nonresident sterile compounding: The board denied three (3) nonresident sterile compounding applications based on pending investigations of pharmacies with common ownership, formal license discipline, and failure to pass the board's licensing inspection.
- Nonresident Outsourcing Facility: The board denied one (1) nonresident outsourcing facility license application based on non-compliance with good manufacturing practices and/or failure to comply with regulations adopted by the board.

#### FY 2021/22

- Pharmacy Technician: The board denied 30 pharmacy technician applications, typically for one or more
  convictions of a crime substantially related to the functions of a pharmacy technician, including driving
  under the influence of alcohol, theft, lewd conduct, battery, and possession of a controlled substance.
- Pharmacist: The board denied five (5) pharmacist applications based on criminal history, prior or pending license discipline, exam misconduct, and mental evaluation per CC&R 1769.
- Designated Representative 3PL: The board denied one (1) designated representative 3PL application based on criminal history.
- Pharmacy: The board denied 12 pharmacy applications primarily due to pending investigations of pharmacies with common ownership or prescriber ownership.
- Nonresident pharmacy and nonresident sterile compounding: The board denied three (3) nonresident
  pharmacy applications and two (2) nonresident sterile compounding applications based on disciplinary
  action in their home states, prescriber ownership, and failure to comply with regulations adopted by
  the board.
- Outsourcing: The board denied one (1) outsourcing facility license application based on noncompliance with good manufacturing practices and/or failure to comply with regulations adopted by the board.
- Wholesaler: The board denied one (1) wholesaler application based on pending discipline.

#### FY 2022/23

Pharmacy Technician: The board denied 40 pharmacy technician applications, typically for one or more
convictions of a crime substantially related to the functions of a pharmacy technician, including, driving
under the influence of alcohol and/or drugs, theft, battery, vehicular manslaughter, offenses involving

- weapons, lewd act (sex offender registration), and drug related offenses. Additionally, applications were denied based on unprofessional conduct and a mental evaluation per CC&R 1769.
- Pharmacist: The board denied nine (9) pharmacist applications based on one or more convictions of a
  crime substantially related to the functions of a pharmacist including driving under the influence of
  alcohol and/or drugs. Additionally, applications were denied based on previous license discipline and a
  mental evaluation per CC&R 1769.
- Intern Pharmacist: The board denied three (3) intern pharmacist applications based on unprofessional conduct, and one or more convictions of a crime substantially related to the functions of an intern pharmacist including, driving under the influence of alcohol and/or drugs.
- Designated Representative: The board denied two (2) designated representative applications based on one or more convictions of a crime substantially related to the functions of a designated representative including driving under the influence of alcohol and/or drugs.
- Pharmacy: The board denied 14 pharmacy applications primarily due to pending investigations of pharmacies with common ownership or prescriber ownership. Applications were also denied due to unlicensed activity and false statements on the application.
- Nonresident Outsourcing Facility: The board denied three (3) nonresident outsourcing facility license
  applications based on non-compliance with good manufacturing practices and/or failure to comply
  with regulations adopted by the board.
- Nonresident Sterile Compounding: The board denied two (2) nonresident sterile compounding license applications for failure to comply with regulations adopted by the board.
- Sterile Compounding: The board denied one (1) sterile compounding license application failure to comply with regulations adopted by the board.

Table 6. Licensee	Table 6. Licensee Population							
License Type		FY 2020/21	FY 2021/2 2	FY 2022/23	FY 2023/24			
	Active[1]	2745	2720	2763				
Designated	Out of State	*	1238	1323				
Representative	Out of Country	*	2	1				
Wholesaler	Delinquent/Expired	95	44	88				
(EXC)	Inactive	0	0	0				
	Other[2]	4	4	0				
Designated	Active[1]	57	54	55				
Representative	Out of State	*	0	1				
Veterinary Food-	Out of Country	*	0	0				
Animal Drug	Delinquent/Expired	2	0	0				
Retailer (EXV)	Other[2]	0	0	0				

Designated	Active[1]	383	387	646	
Representative	Out of State	*	277	653	
Third-Party	Out of Country	*	1	1	
Logistics	Delinquent/Expired	9	6	15	
Provider (DRL)	Other[2]	0	0	0	
Designated	Active[1]	4	7	13	
Representative	Out of State	*	4	10	
Reverse	Out of Country	*	0	0	
Distributor	Delinquent/Expired	3	3	1	
(DRR)	Other[2]	0	0	0	
	Active[1]	3	3	3	
Designated	Out of State	*	1	1	
Paramedic	Out of Country	*	0	0	
(DPM)	Delinquent/Expired	0	0	0	
	Other[2]	0	0	0	
	Active[1]	5999	5358	4789	
Intern	Out of State	*	317	282	
Pharmacist	Out of Country	*	5	4	
(INT)	Inactive	N/A	N/A	1	
	Other[2]	0	0	1	
	Active[1]	45243	44532	45134	
	Out of State	*5792	*5453	4990	
	Out of Country	*161	*157	105	
Pharmacist	Delinquent/Expired	2485	3019	3327	
(RPH)	Retired Status if				
	applicable	1798	2127	2377	
	Inactive	1256	1184	1118	
	Other[2]	93	69	24	
	Active[1]	871	1031	1154	
	Out of State	*	25	29	
Advanced	Out of Country	*	1	1	
Practice	Delinquent/Expired	18	33	36	
Pharmacist	Retired Status if				
(APH)	applicable	0	0	0	
	Inactive	0	0	0	
	Other[2]	1	2	1	
	Active[1]	66575	66252	64248	
	Out of State	*	1418	1378	
Pharmacy	Out of Country	*	19	22	
Technician	Delinquent/Expired	1252	999	1029	
(TCH)	Retired Status if applicable	N/A	N/A	N/A	
	Inactive	4	0	0	

	Other[2]	155	162	32	
Automated Drug	Active[1]	850	977	1034	
Delivery System	Delinquent/Expired	0	27	27	
(ADD)	Other[2]	0	0	0	
Automated Drug	Active[1]	1	1	1	
Delivery System	Delinquent/Expired	0	0	0	
EMS					
(ADE)	Other[2]	0	0	0	
Automated	Active[1]	0	0	1	
Patient	Delinquent/Expired	0	0	0	
Dispensing System 340B Clinic (ADC)	Other[2]	0	0	0	
Centralized	Active[1]	10	11	11	
Hospital	Delinquent/Expired	0	0	0	
Packaging (CHP/CHE)	Other[2]	0	0	0	
Clinia	Active[1]	2109	2136	2280	
Clinic (CLN/CLE)	Delinquent/Expired	127	162	60	
(CLIN/CLE)	Other[2]	0	0	0	
E	Active[1]	30	30	0	
Exempt Hospital (DRM/DRE)	Delinquent/Expired	2	1	0	
(DKIVI/DKE)	Other[2]	0	0	476	
Haan'tal	Active[1]	471	483	0	
Hospital (HSP/HPE)	Delinquent/Expired	1	1	0	
(HSF/HFL)	Other[2]	0	0	0	
Hypodermic	Active[1]	237	233	214	
Needle and	Delinquent/Expired	65	65	18	
Syringe (HYP/HYE)	Other[2]	0	0	0	
Licensed	Active[1]	61	58	57	
Correctional	Delinquent/Expired	0	1	0	
Facility (LCF)	Other[2]	0	0	0	
Outsourcing	Active[1]	4	4	4	
Facility	Delinquent/Expired	0	0	0	
(OSF)	Other[2]	0	0	0	
Outsourcing	Active[1]	25	19	19	
Facility-	Out of State	25	19	19	
Nonresident	Delinquent/Expired	0	2	0	
(NSF)	Other[2]	0	0	0	
Dharmasi	Active[1]	6462	6385	6212	
Pharmacy (PHY/PHE)	Delinquent/Expired	51	52	16	
(1111/11112)	Other[2]	0	0	0	

Pharmacy-Nonresident   Compounding Pharmacy (LSC/LSE)   Active[1]   Active[1		Active[1]	556	569	570	
Nonresident (NRP)	Pharmacy-					
Cher/2						
Remote Dispensing Pharmacy (PHR)	(NRP)					
Delinquent/Expired   0	Remote					
Pharmacy (PHR)   Sterile   Compounding Pharmacy (LSC/LSE)   Sterile   Compounding Pharmacy (LSC/LSE)   Sterile   Compounding Pharmacy-Nonresident (NSC)   Out of State   Compounding Pharmacy-Nonresident (NSC)   Other[2]   Out of State   Compounding Pharmacy-Nonresident (NSC)   Other[2]   Out of State   Out of State   Compounding Pharmacy-Nonresident (NSC)   Other[2]   Out of State   Out of St						
Sterile		Delinquent/Expireu	U	U	U	
Delinquent/Expired   11   5   8   New York	,	Other[2]	0	0	0	
Pharmacy (LSC/LSE)		Active[1]	840	834	808	
CLSC/LSE  Sterile		Delinquent/Expired	11	5	8	
Out of State	•	Other[2]	0	0	0	
Delinquent/Expired   3	Sterile	Active[1]	60	55	55	
Nonresident (NSC)	Compounding	Out of State	60	55	55	
Other[2]	•	Delinquent/Expired	3	4	3	
Satellite Sterile			0	0	0	
Delinquent/Expired   Delinqu		Active[1]	6	6	8	
Pharmacy (SCP/SCE)	Compounding					
Surplus   Active[1]   1						
Medication Distribution Intermediary (SME)         Delinquent/Expired         0         0         0           Third-Party Logistics Provider (TPL)         Active[1]         30         34         33           Delinquent/Expired (TPL)         0         0         0           Third-Party Logistics Provider (TPL)         Other[2]         0         0         0           Third-Party Logistics Provider-Nonresident (NPL)         Out of State         101         116         129           Delinquent/Expired Nonresident (NPL)         Other[2]         0         0         0           Veterinary Food-Animal Drug Retailer (VET)         Active[1]         19         18         17           Wholesaler (WLS/WLE)         Other[2]         0         0         0         0           Wholesaler (NDS)         Active[1]         514         493         433           Wholesaler (NDS)         Delinquent/Expired         42         62         45           Other[2]         4         4         1           Active[1]         752         769         755           Out of State         752         769         755           Out of State         752         769         755           Delinquent/Expired		Active[1]	1	1	1	
Distribution   Intermediary (SME)	•					
Third-Party Logistics   Delinquent/Expired   5   5   2	Intermediary			0		
Delinquent/Expired   5   5   2		Active[1]	30	34	33	
Provider (TPL)         Other[2]         O         O         O           Third-Party Logistics Provider-Nonresident (NPL)         Out of State         101         116         129           Provider-Nonresident (NPL)         Delinquent/Expired         0         1         2           Veterinary Food-Animal Drug Retailer (VET)         Delinquent/Expired         1         3         1           Wholesaler (WLS/WLE)         Active[1]         514         493         433           Delinquent/Expired 42         62         45           Other[2]         4         4         1           Wholesaler (WLS/WLE)         Active[1]         752         769         755           Out of State Delinquent/Expired Delinquent/Expired Delinquent/Expired Transported Tra	Logistics					
Third-Party Logistics   Out of State   101   116   129			0	0	0	
Delinquent/Expired   Delinqu		Active[1]	101	116	129	
Delinquent/Expired   Delinqu	Logistics			1		
Nonresident (NPL)	Provider-	Delinguent/Expired	0	1	2	
Veterinary Food-Animal Drug Retailer (VET)         Active[1]         19         18         17           Wholesaler (WLS/WLE)         Other[2]         0         0         0           Wholesaler (WLS/WLE)         Delinquent/Expired         42         62         45           Other[2]         4         4         1           Wholesaler-Nonresident (OSD)         Out of State         752         769         755           Delinquent/Expired         77         92         43			0	0		
Animal Drug   Delinquent/Expired   1   3   1		Active[1]	19	18	17	
Retailer (VET)         Other[2]         0         0         0           Wholesaler (WLS/WLE)         Active[1]         514         493         433           Delinquent/Expired         42         62         45           Other[2]         4         4         1           Wholesaler-Nonresident (OSD)         Out of State         752         769         755           Delinquent/Expired         77         92         43	•					
Wholesaler (WLS/WLE)       Active[1]       514       493       433         Delinquent/Expired       42       62       45         Other[2]       4       4       1         Wholesaler-Nonresident (OSD)       Out of State       752       769       755         Delinquent/Expired       77       92       43		· ·	0	0		
Wholesaler (WLS/WLE)         Delinquent/Expired         42         62         45           Other[2]         4         4         1           Wholesaler-Nonresident (OSD)         Out of State         752         769         755           Delinquent/Expired         77         92         43	, ,	Active[1]	514	493	433	
Wholesaler-Nonresident (OSD)         Out of State         752         769         755           Delinquent/Expired         77         92         43						
Wholesaler-Nonresident (OSD)         Active[1]         752         769         755           Delinquent/Expired         752         769         755           Delinquent/Expired         77         92         43	(VVLS/VVLE)	· · · · ·	4	4	1	
Wholesaler- Nonresident (OSD)  Out of State 752 769 755  Delinquent/Expired 77 92 43			752	769	755	
Nonresident (OSD) Delinquent/Expired 77 92 43						
(05D)						
	(020)	· · · · ·	1			

* FY 20/21 separated data not available as the report used was the	
CAS generated Primary Status Report	
Note: 'Out of State' and 'Out of Country' are two mutually exclusive	
categories. A licensee should not be counted in both	

Table	7a. Licensii	ng Data by	у Туре								
FY 20/ 21	License Type	Applica tion Type	Rece ived	Appro ved/ Issue d	Closed (Withdr awn)	Pendin g Applica tions	Cycle 7				
						Total (Close of FY)	# Com plete - withi n Boar d contr ol*	# Incom plete- outsid e Board control *	Comp lete Apps	Inco mplet e Apps	com bine d, IF unab le to sepa rate out
FY 202	Designat ed	License	436	312	241	253	83	229	59	166	N/A
0/2	Represen tative Wholesal er (EXC)	Renew al	2,34 6	2,363	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Designat ed	License	5	2	1	7	0	2	N/A	373	N/A
	Represen tative Veterinar y Food- Animal Drug Retailer (EXV)	Renew al	50	51	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Designat ed	License	108	91	70	49	25	66	61	170	N/A
	Represen tative Third- Party Logistics Provider (DRL)	Renew al	274	277	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Designat ed	License	3	3	2	0	0	3	N/A	204	N/A

Represen tative Reverse Distribut or (DRR)	Renew	1	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Designat ed	License	0	0	0	0	0	0	N/A	N/A	N/A
Paramed ic (DPM)	Renew al	1	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Intern Pharmaci	License	1,65 2	1,611	10	127	1,27 5	336	22	68	N/A
st (INT)	Renew al	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Pharmaci st	Examin ation	3,99 3	3,495	675	1,516	1,72 3	416	17	64	N/A
(RPH)	License	1,95 4	1,964	0	0	1,89 2	72	2	27	N/A
	Renew al	20,4 04	20,41	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Advance d	License	167	87	13	138	17	70	41	251	N/A
Practice Pharmaci st (APH)	Renew al	416	410	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Pharmac y	License	4,79 6	4,004	17	1,808	2,74 6	1,258	55	115	N/A
Technicia n (TCH)	Renew	29,6 51	29,07	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Automat ed Drug	License	233	150	21	199	0	150	N/A	81	N/A
Delivery System (ADD)	Renew al	790	790	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Automat ed Drug	License	0	0	0	0	0	0	N/A	N/A	N/A
Delivery System EMS (ADE)	Renew	1	1	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Automat	License	0	0	0	0	0	0	N/A	N/A	N/A
Patient Dispensi	Renew	0	0	N/A	N/A	N/A	N/A	N/A	N/A	N/A

ng System 340B Clinic (ADC)										
Centraliz ed	License	1	1	1	4	0	1	N/A	755	N/A
Hospital Packagin g (CHP/CH E)	Renew	8	10	N/A						
Clinic (CLN/CLE	License	157	115	22	132	17	98	35	166	N/A
)	Renew al	1,10 3	960	N/A						
Exempt Hospital	License	4	3	0	4	1	2	2	552	N/A
(DRM/D RE)	Renew al	19	27	N/A						
Hospital (HSP/HP	License	24	29	1	13	7	22	54	120	N/A
E)	Renew al	433	433	N/A						
Hypoder mic	License	13	3	0	12	0	3	N/A	146	N/A
Needle and Syringe (HYP/HY E)	Renew	220	221	N/A						
Licensed Correctio	License	0	0	0	0	0	0	N/A	N/A	N/A
nal Facility (LCF)	Renew al	61	61	N/A						
Outsourc ing	License	0	1	0	0	0	1	N/A	84	N/A
Facility (OSF)	Renew al	4	3	N/A						
Outsourc ing	License	7	4	0	9	0	4	N/A	549	N/A
Facility- Nonresid ent (NSF)	Renew al	20	19	N/A						

51			200	204	26	222	447	464	25	420	21/2
y Pna	armac	License	388	281	26	223	117	164	35	129	N/A
(PH E)	HY/PH	Renew al	6,04 9	6,197	N/A						
Pha y-	armac	License	137	87	5	164	20	67	20	201	N/A
No ent	nresid t RP)	Renew	48	491	N/A						
	mote spensi	License	3	2	0	4	0	2	N/A	78	N/A
у	armac	Renew al	1	1	N/A						
Ste	HR) erile mpou	License	87	83	8	86	17	66	103	242	N/A
ndi Pha y	ing armac	Renew	727	797	N/A						
Ste	erile	License	15	5	2	14	0	5	N/A	95	N/A
ndi Pha y-		Renew	55	55	N/A						
Sat	tellite erile	License	2	2	1	4	0	1	N/A	294	N/A
Condi Pha y	mpou ing armac	Renew al	5	5	N/A						
	rplus edicati	License	0	0	0	0	0	0	N/A	N/A	N/A
on Dis on Int iar	stributi ermed	Renew al	1	1	N/A						
Thi Par	ird- rty	License	11	6	1	4	3	3	54	67	N/A

	Logistics	Renew	25	23	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Provider (TPL)	al									
·	Third- Party	License	36	21	5	57	5	16	36	153	N/A
	Logistics Provider- Nonresid ent (NPL)	Renew al	79	76	N/A	N/A	N/A	N/A	N/A	N/A	N/A
·	Veterinar y Food-	License	0	0	1	0	0	0	N/A	N/A	N/A
	Animal Drug Retailer (VET)	Renew al	17	16	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Wholesal er	License	65	47	6	46	16	31	8	159	N/A
	(WLS/WL E)	Renew al	416	428	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Wholesal er-	License	109	70	7	119	11	59	9	162	N/A
	Nonresid ent(OSD)	Renew al	660	673	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	License Type	Applica tion Type	Rece ived	Appro ved/ Issue d	Closed (Withdr awn)	Pendin g Applica tions	Cycle <sup>-</sup>	Fimes			
						Total (Close of FY)	Com plete - withi n Boar d contr ol*	Incom plete- outsid e Board control	Comp lete Apps	Inco mplet e Apps	com bine d, IF unab le to sepa rate out

FY	License	Applic	Rece	Appr	Closed	Pendi	Cycle T	imes			
202	Туре	ation	ived	oved/	(Withd	ng					
1/22		Туре		Issue	rawn)	Applic					
				d		ations					
						Total	Com	Incom	Com	Incom	comb
						(Close	plete	plete-	plete	plete	ined,
						of FY)	-	outsid	Apps	Apps	IF

							withi n Boar d contr ol*	e Board contro I*			unabl e to separ ate out
FY 202	Designated Representat	Licens e	379	325	4	291	74	251	49	160	N/A
1/22	ive Wholesaler (EXC)	Renew al	2,39 0	2,469	N/A	N/A	N/A	N/A	4	N/A	N/A
	Designated Representat	Licens e	3	1	0	9	0	1	N/A	105	N/A
	ive Veterinary Food- Animal Drug Retailer (EXV)	Renew al	50	53	N/A	N/A	N/A	N/A	3	N/A	N/A
	Designated Representat	Licens e	116	62	0	101	10	52	45	136	N/A
	ive Third- Party Logistics Provider (DRL)	Renew al	325	347	N/A	N/A	N/A	N/A	3	N/A	N/A
	Designated Representat	Licens e	8	3	0	5	0	3	N/A	88	N/A
	ive Reverse Distributor (DRR)	Renew al	4	4	N/A	N/A	N/A	N/A	3	N/A	N/A
	Designated Paramedic	Licens e	1	1	0	0	0	1	N/A	98	N/A
	(DPM)	Renew al	1	2	N/A	N/A	N/A	N/A	6	N/A	N/A
	Intern Pharmacist	Licens e	1,53 4	1,481	2	162	1,260	221	19	58	N/A
	(INT)	Renew al	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	Pharmacist (RPH)	Exami nation	3,99 5	3,563	449	1,645	1,645	325	25	73	N/A
		Licens e	1,70 1	1,692	0	0	1,650	42	2	54	N/A
		Renew al	22,6 77	22,56 3	N/A	N/A	N/A	N/A	11	8	N/A
	Advanced Practice	Licens e	140	178	0	98	24	154	48	248	N/A

Pharmacist (APH)	Renew al	446	452	N/A	N/A	N/A	N/A	4	46	N/A
Pharmacy Technician	Licens e	5,47 8	5,790	493	962	3,578	2,212	34	116	N/A
(TCH)	Renew al	28,4 74	28,26 9	N/A	N/A	N/A	N/A	14	N/A	N/A
Automated Drug	Licens e	204	183	44	165	0	193	N/A	121	N/A
Delivery System (ADD)	Renew al	825	983	N/A	N/A	N/A	N/A	5	3	N/A
Automated Drug	Licens e	0	0	0	0	0	0	N/A	N/A	N/A
Delivery System EMS (ADE)	Renew al	1	1	N/A	N/A	N/A	N/A	3	N/A	N/A
Automated Patient	Licens e	2	0	0	0	0	0	N/A	N/A	N/A
Dispensing System 340B Clinic (ADC)	Renew al	0	0	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Centralized Hospital	Licens e	1	1	1	3	0	1	N/A	1,118	N/A
Packaging (CHP/CHE)	Renew al	10	11	N/A	N/A	N/A	N/A	N/A	25	N/A
Clinic (CLN/CLE)	Licens e	154	132	9	142	26	106	31	200	N/A
	Renew al	2,00 7	2,056	N/A	N/A	N/A	N/A	6	N/A	N/A
Exempt Hospital	Licens e	2	4	0	2	0	4	N/A	206	N/A
(DRM/DRE)	Renew al	29	30	N/A	N/A	N/A	N/A	10	N/A	N/A
Hospital (HSP/HPE)	Licens e	29	31	0	10	6	25	22	187	N/A
	Renew al	445	465	N/A	N/A	N/A	N/A	7	N/A	N/A
Hypodermic Needle and	Licens e	10	3	0	14	0	3	N/A	252	N/A
Syringe (HYP/HYE)	Renew al	220	229	N/A	N/A	N/A	N/A	7	N/A	N/A
Licensed Correctional	Licens e	1	0	0	1	0	0	N/A	N/A	N/A
Facility (LCF)	Renew al	58	58	N/A	0	N/A	N/A	4	N/A	N/A

Outsourcing Facility	Licens e	0	0	0	0	0	0	N/A	N/A	N/A
(OSF)	Renew al	4	5	N/A	N/A	N/A	N/A	N/A	53	N/A
Outsourcing Facility-	Licens e	3	1	1	9	0	1	N/A	315	N/A
Nonresident (NSF)	Renew al	19	19	N/A	N/A	N/A	N/A	N/A	48	N/A
Pharmacy (PHY/PHE)	Licens e	391	386	15	193	51	335	45	160	N/A
	Renew al	6,30 2	6,446	N/A	N/A	N/A	N/A	5	9	N/A
Pharmacy- Nonresident	Licens e	143	116	9	179	21	95	54	246	N/A
(NRP)	Renew al	494	495	N/A	N/A	N/A	N/A	4	12	N/A
Remote Dispensing	Licens e	1	1	0	4	0	1	N/A	254	N/A
Pharmacy (PHR)	Renew al	1	1	N/A	N/A	N/A	N/A	44	N/A	N/A
Sterile Compoundi	Licens e	67	68	5	79	0	68	N/A	312	N/A
ng Pharmacy (LSC/LSE)	Renew al	784	797	N/A	N/A	N/A	N/A	N/A	28	N/A
Sterile Compoundi	Licens e	13	4	3	21	0	4	N/A	153	N/A
ng Pharmacy- Nonresident (NSC)	Renew al	53	53	N/A	N/A	N/A	N/A	N/A	42	N/A
Satellite Sterile	Licens e	0	0	0	3	0	0	N/A	N/A	N/A
Compoundi ng Pharmacy (SCP/SCE)	Renew al	5	6	N/A	N/A	N/A	N/A	N/A	23	N/A
Surplus Medication	Licens e	0	0	0	0	0	0	N/A	N/A	N/A
Distribution Intermediar y	Renew al	1	1	N/A	N/A	N/A	N/A	1	N/A	N/A
(SME)	Liener	_	4		-		4	D1/A	452	N1 / A
Third-Party Logistics	Licens e	5	4	0	5	0	4	N/A	153	N/A

	Provider (TPL)	Renew al	32	34	N/A	N/A	N/A	N/A	7	N/A	N/A
	Third-Party Logistics	Licens e	34	18	7	62	3	15	20	207	N/A
	Provider- Nonresident (NPL)	Renew al	95	96	N/A	N/A	N/A	N/A	8	10	N/A
	Veterinary Food-	Licens e	1	1	0	0	0	1	N/A	259	N/A
	Animal Drug Retailer (VET)	Renew al	16	18	N/A	N/A	N/A	N/A	6	N/A	N/A
	Wholesaler( WLS/WLE)	Licens e	45	39	1	48	3	36	19	158	N/A
		Renew al	449	466	N/A	N/A	N/A	N/A	8	N/A	N/A
	Wholesaler- Nonresident	Licens e	97	87	10	121	9	78	30	228	N/A
	(OSD)	Renew al	678	716	N/A	N/A	N/A	N/A	8	32	N/A
* Opt	ional. List if tra	icked by t	he boa	rd.							

FY 202 2/23	License Type	Applic ation Type	ived oved	Appr oved/ Issue d	Closed (Withd rawn)	Pendi ng Applic ations	Cycle T	imes			
						Total (Close of FY)	Com plete - withi n Boar d contr ol*	Incom plete- outsid e Board contro I*	Com plete Apps	Incom plete Apps	comb ined, IF unabl e to separ ate out
FY 202	Designated Representat	Licens e	465	434	107	226	219	215	74	215	N/A
2/23	ive Wholesaler (EXC)	Renew al	2281	2270	N/A	N/A	N/A	N/A	3	30	N/A
	Designated Representat	Licens e	8	6	3	7	0	6	N/A	432	N/A
	ive Veterinary Food-	Renew al	46	45	N/A	N/A	N/A	N/A	3	N/A	N/A

Animal Drug Retailer (EXV)										
Designated Representat	Licens e	145	137	9	99	57	90	80	158	N,
ive Third- Party Logistics Provider (DRL)	Renew al	341	339	N/A	N/A	N/A	N/A	247	N/A	N,
Designated Representat	Licens e	6	7	1	3	2	109	5	154	N,
ive Reverse Distributor (DRR)	Renew	7	7	N/A	N/A	N/A	N/A	11	17	N,
Designated Paramedic	Licens e	1	1	0	0	1	71	0	N/A	N,
(DPM)	Renew al	0	0	N/A	N/A	N/A	N/A	N/A	N/A	N,
Intern Pharmacist	Licens e	1312	1323	59	87	1047	276	15	51	N,
(INT)	Renew al	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N,
Pharmacist (RPH)	Exami nation	3468	3225	258	3107	1502	475	26	62	N,
	Licens e	1801	1813	0	0	1789	2	24	37	N,
	Renew al	2160 0	2154 2	N/A	N/A	N/A	N/A	3	44	N,
Advanced Practice	Licens e	163	154	0	104	73	81	66	206	N,
Pharmacist (APH)	Renew al	519	511	N/A	N/A	N/A	N/A	3	28	N,
Pharmacy Technician	Licens e	5494	3742	111	2483	2495	1247	45	94	N,
(TCH)	Renew al	2876 8	2853 2	N/A	N/A	N/A	N/A	3	32	N,
Automated Drug	Licens e	385	293	9	252	155	138	57	126	N,
Delivery System (ADD)	Renew	856	857	N/A	N/A	N/A	N/A	3	N/A	N,
Automated Drug	Licens e	0	0	0	0	0	0	N/A	N/A	N,
Delivery System EMS (ADE)	Renew al	1	1	N/A	N/A	N/A	N/A	5	N/A	N,

Automated Patient	Licens e	1	1	0	0	0	1	N/A	113	N/A
Dispensing System 340B Clinic (ADC)	Renew al	0	0	N/A						
Centralized Hospital	Licens e	0	0	2	1	0	0	N/A	N/A	N/A
Packaging (CHP/CHE)	Renew al	9	9	N/A	N/A	N/A	N/A	N/A	30	N/A
Clinic (CLN/CLE)	Licens e	312	242	29	179	24	218	50	154	N/A
	Renew al	2094	2060	N/A	N/A	N/A	N/A	4	44	N/A
Exempt Hospital	Licens e	0	1	1	1	1	0	N/A	33	N/A
(DRM/DRE)	Renew al	30	29	N/A	N/A	N/A	N/A	4	36	N/A
Hospital (HSP/HPE)	Licens e	13	10	2	8	2	8	49	154	N/A
	Renew al	462	456	N/A	N/A	N/A	N/A	3	26	N/A
Hypodermic Needle and	Licens e	6	5	0	15	0	5	N/A	287	N/A
Syringe (HYP/HYE)	Renew al	216	207	N/A	N/A	N/A	N/A	3	42	N/A
Licensed Correctional	Licens e	2	1	0	1	0	1	N/A	355	N/A
Facility (LCF)	Renew al	57	57	N/A	N/A	N/A	N/A	2	N/A	N/A
Outsourcing Facility	Licens e	2	2	0	1	0	2	N/A	62	N/A
(OSF)	Renew al	3	4	N/A	N/A	N/A	N/A	N/A	33	N/A
Outsourcing Facility-	Licens e	10	2	2	12	0	2	N/A	547	N/A
Nonresident (NSF)	Renew al	18	17	N/A	N/A	N/A	N/A	26	47	N/A
Pharmacy (PHY/PHE)	Licens e	385	271	40	257	100	171	45	156	N/A
·	Renew al	6075	6020	N/A	N/A	N/A	N/A	4	22	N/A
Pharmacy- Nonresident	Licens e	110	80	13	189	16	64	35	267	N/A
(NRP)	Renew	516	499	N/A	N/A	N/A	N/A	4	28	N/A

	note pensing	Licens e	1	0	0	5	0	0	N/A	N/A	N/A
-	irmacy	Renew	2	2	N/A	N/A	N/A	N/A		51	N/A
Ster	rile npoundi	Licens e	52	47	11	71	0	47	N/A	346	N/A
ng Pha	rmacy C/LSE)	Renew	767	791	N/A	N/A	N/A	N/A	23	33	N/A
Ster Con	rile npoundi	Licens e	15	7	9	18	0	7	N/A	302	N/A
	armacy- nresident C)	Renew al	51	49	N/A	N/A	N/A	N/A	N/A	63	N/A
Sate Ster	ellite rile	Licens e	1	2	0	2	0	2	N/A	492	N/A
ng Pha	mpoundi armacy P/SCE)	Renew al	8	7	N/A	N/A	N/A	N/A	N/A	11	N/A
	plus dication	Licens e	0	0	0	0	0	0	N/A	N/A	N/A
Inte	tribution ermediar	Renew al	1	1	N/A	N/A	N/A	N/A	30	N/A	N/A
y (SM	•										
	rd-Party istics	Licens e	4	4	1	4	0	4	N/A	180	N/A
Pro (TPI	vider L)	Renew al	31	29	N/A	N/A	N/A	N/A	6	18	N/A
	rd-Party istics	Licens e	45	26	7	75	4	22	49	286	N/A
	vider- nresident PL)	Renew al	106	108	N/A	N/A	N/A	N/A	4	37	N/A
	erinary	Licens e	2	2	0	0	0	2	N/A	277	N/A
Anii	mal Drug ailer	Renew	15	14	N/A	N/A	N/A	N/A	3	44	N/A
	olesaler( S/WLE)	Licens e	58	32	3	71	5	27	52	179	N/A
		Renew al	403	393	N/A	N/A	N/A	N/A	3	67	N/A
		Licens e	119	82	4	153	14	68	65	212	N/A

	Wholesaler-	Renew	696	675	N/A	N/A	N/A	N/A	3	39	N/A
	Nonresident	al									
	(OSD)										
* Optional. List if tracked by the board.											

Table 7b. License Denial				
	FY 20/21	FY 21/22	FY 22/23	FY 23/24
License Applications Denied (no hearing requested)	14	32	52	
SOIs Filed	13	25	24	
Average Days to File SOI (from request for hearing to SOI filed)	135	137	71	
SOIs Declined	0	0		
SOIs Withdrawn	11	10	3	
SOIs Dismissed (license granted)	0	0	2	
License Issued with Probation / Probationary License Issued	8	3	7	
Average Days to Complete (from SOI filing to outcome)	329	255	146	

# Verification of Information from Applicants

#### **Application Information**

The board uses multiple processes to secure information about applicants to confirm their eligibility for licensure. The board fingerprints all applicants. The board has fingerprinted pharmacists since the 1940s and checks all applicants' fingerprints with the California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI).

The board also conducts a criminal background check on the top five owners and designated managers for site license applications. In addition, these individuals are required to report under oath any arrest or conviction and any previous or close association to anyone disciplined by any regulatory agency.

Applicants who self-report a criminal conviction or prior discipline by a regulatory agency are requested to submit documentation describing the action and resolution. If the applicant does not submit documentation, the board investigates and reviews the information before deciding the license application. As of July 1, 2020, the board removed the criminal history question from licensing applications pursuant to AB 2138. The board has not denied applications based on failure to disclose criminal history.

In addition, the Board maintains secure access to the National Association Boards of Pharmacy to review pharmacist graduate transcripts to verify educational licensure requirements are met and license status in other jurisdictions. Staff also verify through the NABP foreign educated applicant's education. The Board also requires reports from the National Practitioner Data Bank to assess for disciplinary actions from other regulatory agencies.

Staff conduct online license verifications for licensees who hold or held a license in another state or with the California Department of Public Health and verifies Statement of Information filed with the California Secretary of State for site applications. Staff uses the Department of Consumer Affairs licensure system to confirm licensure for individuals licensed by other regulatory boards.

Staff verify certifications from various organizations depending on the application and requirements and reviews supporting documents received as part of the application process to confirm accuracy. Staff also utilizes Lexus Nexus to verify ownership information, when necessary.

# Out-of-State/Out-of-Country Applications

The board requires out-of-state pharmacist applicants to meet the same examination and licensure requirements as California graduates. Pursuant to Business and Professions Code sections 4200 and 4208, foreign-educated pharmacists are required to be certified by the Foreign Pharmacy Graduate Examination Committee (FPGEC) before being issued an intern pharmacist license or becoming eligible to take the pharmacist licensure exam.

Out-of-state businesses must also meet all of the same licensure requirements as California businesses. In addition to application materials, the board requires state license verification as well as a copy of the most recent inspection report conducted by a regulatory or licensing agency of the state where the business is located for many nonresident license programs. This information assists the board's background check before issuing a California license to an out-of-state business. Recently, the Board pursued a statutory change to waive the home state licensure requirement for a nonresident third-party logistics provider if the board inspects the location and finds it to be in compliance with this article and any regulations adopted by the board or the applicant provides evidence of its accreditation by the Drug Distributor Accreditation program of the National Association of Boards of Pharmacy. The nonresident third-party logistics provider shall reimburse the board for all actual and necessary costs incurred by the board in conducting an inspection of the location, pursuant to subdivision (v) of Section 4400.

# Military Education and Training

With the exception of the intern pharmacist license (which does not have an experience component as a pathway to licensure), the board accepts military training and experience for purposes of licensure. Further, the pharmacy technician requirements for licensure specifically establish training earned in the military as one pathway to licensure.

Over the past three fiscal years the board has waived renewal fees and continuing education requirements for 1 individual in fiscal year 21/22 pursuant to BPC section 114.3. This has not caused an impact on revenues.

Over the past three fiscal years the board has expedited the processing of the following military applications.

Military Spouse/Partner. BPC 115.5	17	23	24	
Serving in the Military, BPC 114.5	10	19	16	
Veterans, BPC 115.4	77	97	94	
Total	104	139	134	

In addition, the Board has expedited the following applications for refugees for the following:

Refugee Expedite Applications	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Refugee pursuant to section 1157				
of Title 8 of the United States				
Code	5	29	10	
Refugee granted asylum by the				
Secretary of Homeland Security				
or the Attorney General of the				
United States pursuant to section				
1158 of Title 8 of the United				
States Code.	0	1	23	
Refugee with a special immigrant				
visa that has been granted a				
status pursuant to section 1244				
of Public Law 110-181, Public Law				
109-163, or section 602(b) of title				
VI of division F of Public Law 111-				
8.	0	0	5	
Total	5	30	38	

# No Longer Interested Notifications

The board has established an automated process to send "No Longer Interested" (NLI) notifications to Department of Justice (DOJ) monthly. The board is working with Department of Consumer Affairs (DCA) Office of Information Services to streamline this automation process for each license type to send information to clear any backlog of older records. Additionally, the Board is able to submit NLI notifications electronically through the online DOJ portal daily.

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
NLI Notifications	2,282	1,307	1751	

### **Examinations**

# **Examinations Required for Licensure**

Applicants for licensure as a pharmacist must take and pass both the North American Pharmacist Licensure Examination (NAPLEX) and the California Practice Standards and Jurisprudence Examination for

Pharmacists (CPJE). The National Association of Boards of Pharmacy (NABP) develops the NAPLEX, which is used for licensure by all states. By statute, the CPJE is developed by the board to assess California-specific law applications, patient consultation skills and other areas of California pharmacy practice not tested by the NAPLEX. Both exams are offered in English only.

#### Pass Rates for First Time vs. Retakes

Twice a year the board publishes passing rate information for both the CPJE as well as the NAPLEX for California applicants who have taken both exams. Table 8 Examination Data is a comprehensive report detailing exam performance for the past four fiscal years.

# **Computer-Based Testing**

Both the NAPLEX and CPJE are administered via computer-based testing on a continuous basis at locations nationwide. The board uses a vendor secured as part of a department-wide contract to administer the CPJE, PSI Services Inc. The NAPLEX is administered through a contractor secured by the NABP, Pearson Vue.

Occupational Analysis		
License Type	RPH	
Exam Title	СРЈЕ	NAPLEX
Date of Last OA	2021	2021
Name of OA Developer	PSI	NABP
Target OA Date	2022	

#### **Examinations**

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Based on the changes to Business and Professions Code section 4200, NAPLEX and CPJE results are evaluated each time an application is processed as well as at the time of licensure which may result in an applicant having to retake the CPJE and/or NAPLEX examination.

# Statutes that Hinder Processing of Applications/Examinations

Processing times are hindered by the Board's reliance on paper versus challenges with statutory requirements. When barriers to licensure are identified, the Board pursues statutory changes to resolve the issues. Recent examples include Board-sponsored legislation to streamline application requirement for advanced practice pharmacists and establishment of alternative pathways to licensure for nonresident third-party logistics providers.

# **School Approvals**

The board does not approve schools of pharmacy. Instead, Pharmacy Law defines "recognized school of pharmacy" as a school of pharmacy accredited or granted candidate status by the Accreditation Council for Pharmacy Education (ACPE). The ACPE is the sole accrediting body for pharmacist education in the United States. The board does not have an official role with the ACPE; however, a board member attends and observes accrediting and reaccrediting visits at California schools of pharmacy.

Additionally, the board receives updates from ACPE on changes in school accreditation status.

The ACPE does not grant full accreditation status until a school graduates its first class of pharmacists, which generally takes four years. The board has used its statutory authority to recognize schools of pharmacy for the limited purpose of issuing intern pharmacist licenses to applicants from schools on track to receive full accreditation by ACPE. The board could remove its recognition of a school of pharmacy if necessary; however, this has never occurred.

There are currently 13 fully accredited schools of pharmacy in California:

- American University of Health Sciences School of Pharmacy, Signal Hill, CA
- California Northstate University College of Pharmacy, Elk Grove, CA
- Chapman University School of Pharmacy, Irvine, CA
- Keck Graduate Institute (KGI) School of Pharmacy and Health Sciences, Claremont, CA
- Loma Linda University School of Pharmacy, Loma Linda, CA
- Touro University California College of Pharmacy, Vallejo, CA
- University of California, San Diego Skaggs School of Pharmaceutical Sciences, La Jolla, CA
- University of California, San Francisco School of Pharmacy, San Francisco, CA
- University of Southern California School of Pharmacy, Los Angeles, CA
- University of the Pacific Thomas J. Long School of Pharmacy and Health Sciences, Stockton, CA

- West Coast University School of Pharmacy, Los Angeles, CA
- Western University of Health Sciences College of Pharmacy, Pomona, CA
- Marshall B. Ketchum University College of Pharmacy, Fullerton, CA

The is one school of pharmacy currently with candidate status:

University of California, Irvine School of Pharmacy, Irvine, CA

In addition, California Health Sciences University College of Pharmacy, Clovis, CA was denied accreditation. Students from this school are completing their education through the university's teach-out program.

The board has no legal requirements regarding approval of international schools.

# Continuing Education/Competency Requirements

Pharmacists and advanced practice pharmacists are required to earn continuing education as a condition of renewal. Pharmacists are required to earn 30 units of CE every two years, and advanced practice pharmacists are required to earn an additional 10 units every two years. Pharmacists and advanced practice pharmacists are exempt from continuing education during their first renewal cycle. Further, effective January 1, 2024, pharmacy technicians will also be required to earn continuing education.

#### **CE Verification**

As a condition of renewal, pharmacists and advance practice pharmacists self-certify completion of continuing education. Although not required, many pharmacists use the CPE monitor offered by the National Association of Boards of Pharmacy to record and maintain their CE information in a central location.

The board does not currently use the DCA cloud for this purpose. However, the board may use the cloud as part of its larger Business Modernization implementation efforts.

#### **CE Audits**

#### **Auditing for Compliance**

The board randomly audits renewal applications to ensure licensees fulfill CE requirements. Pharmacists are required to retain CE completion certificates for four years. Pharmacists selected for audit are notified in writing and must submit copies of CE completion certificates to the board. The board reviews all of the certificates provided to confirm compliance with legal requirements.

When an audit reveals a deficiency, the board typically instructs the licensee to obtain the required CE units. The board may issue a citation and fine for misrepresenting completion of CE on the renewal form. For pharmacists who do not comply, their licenses are converted from active to inactive status as authorized in statute. To reactivate a license, a pharmacist must pay the renewal fee, if applicable and submit satisfactory proof of completing 30 hours of CE. Similar provisions were established for advanced practice pharmacists.

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
Audits Performed	31	189	245	
Passed	24	178	145	
Failed	6	14	100	
CE Failure percentage*	20%	7%	40%	

<sup>\*</sup>Audits performed in FY 2020/21 and FY 2021/22 focused on number of hours earned. FY 2022/23 and future audits will focus on both the number of hours as well as content areas, where applicable.

# **Accreditation Agencies**

Board regulations designate two primary accreditation agencies for continuing education providers and courses: the Accreditation Council for Pharmacy Education and the California Pharmacists Association (formerly known as the Pharmacy Foundation of California). The board does not approve course providers; however, by law the board does accept CE approved by other healing arts boards if it meets standards of relevance to pharmacy practice.

# **Board Policy**

RPH licensees must complete at least 30 CE hours each renewal period (every two years).

Furthermore, as required by regulation, at least two of the 30 hours of must be completed by participation in mandatory board-issued continuing education courses in law and ethics. These two mandatory webinars can be located on the board's website.

The board accepts continuing education coursework accredited by the ACPE and the CPhA. Additionally, the board accepts coursework approved for continuing education by the Medical Board of California, California Board of Podiatric Medicine, the Dental Board of California, and the California Board of Registered Nursing, so long as the coursework is relevant to pharmacy practice.

The board provides the following elective continuing education courses: *Naloxone Training Webinar*, *Training for Furnishing HIV Preexposure and Postexposure Prophylaxis (PrEP/PEP)*, and *Inspection Expectations, Diversion Trends, Loss Prevention, Legal Updates and CURES webinar* (formerly titled *Prescription Drug Abuse and Diversion Prevention Training: What a Pharmacist Needs to Know)*. Upon completion of a board-provided continuing education course, participants will be issued a certificate of completion.

The board awards up to six continuing education credits per renewal period to licensees who attend a full board meeting or committee meeting. The board also awards up to four continuing education credits for successful completion of a BLS/ACLS course, so long as the BLS/ACLS course abides by the guidelines outlined by the Dental Board of California. Licensees may also receive continuing education credit for passing the examination administered by the Commission for Certification in Geriatric Pharmacy.

Licensees may petition for credit for continuing education courses offered by non-recognized providers by submitting an official form and fee, so long as the coursework is relevant to pharmacy practice.

The Board does not audit CE providers.

Table 8a. Continuing Education					
Туре	Frequency	Number of CE	Percentage of	Percentage of	Percentage of
	of	Hours Required	Licensees Audited	Licensees Audited	Licensees
	Renewal	Each Cycle	FY 2020/21	FY 2021/22	Audited
					FY 2022/23
Pharmacist	2 years	30	0.0006%	0.004%	0.005%
Advanced	2 years	40	0	0	0.008%
Practice					
Pharmacist					

# Performance Measures: Intake Cycle Time

Intake cycle time reflects the average number of days from receipt of complaint to the date the matter was assigned for investigation or closed without investigation. The board currently is not meeting its performance measure. Changes in the assignment process have been implemented.

Performance Measure 2 – Intake Cycle Time

Fiscal Year	Complaints Received	Performance Measure	Average Assignment
FY 2020/21	3,095	10	12
FY 2021/22	2,576	10	12
FY 2022/23	3,715	10	14
FY 2023/24		10	

# Performance Measures: Investigation Cycle Time

Investigation cycle time reflects the average number of days from the time the matter was received until the case was closed for those investigations not referred to the Attorney General for disciplinary action. The board currently is not meeting its performance standard.

Performance Measure 3 – Investigation Cycle Time

Fiscal Year	Investigations Closed	Performance Measure	Average Closure
FY 2020/21	2,404	210	267
FY 2021/22	1,971	210	270
FY 2022/23	2,170	210	245
FY 2023/24		210	

In addition to the performance measures reported by DCA, the board internally seeks to complete desk investigations within 90 days and field investigations within 120 days. Additional information about the board's investigation performance is provide in the table below.

# Investigation Closed within Performance Standards – Percentage of Cases Completed within Performance Standard

	Performance Standard	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Desk Investigations	90 days	41%	54%	37%	
Field Investigation	120 days	24%	30%	14%	
Total Investigation Time Including Supervisor's Review	180 days	42%	58%	39%	

As indicated in the table above, the board is not meeting its aggressive performance measures for investigation time frames. The complexity of field investigations varies, depending on the nature and scope of the investigation, which makes completion times challenging. Additionally, the board is focused on completing its oldest cases, which can delay more recently opened investigations. As older investigations are concluded, the board expects an increase in the percentage of field investigations closed within performance standards. The board expects a similar improvement in the percentage of total investigation time closed as cases continue through the review process to ultimate completion.

# **Enforcement Trends: Investigations**

There are several triggering events for the board to initiate an investigation, including external and internal sources. This fiscal year, the board has experienced 15% increase in complaint investigations and a 17% decrease in the number of citations issued. Further, when provisions of pharmacy law change, the board at times experiences increases in types of investigations. As an example, with the passage of SB 1442 and subsequent regulations defining the provisions for community pharmacy staffing, the board has experienced an increase in complaints alleging violations of those provisions. The board has also received a number of complaint allegations relating to recently enacted provisions prohibiting workload quotas.

Table 9a. Enforcement Statistics						
	FY 2020/21	FY 2021/22	FY 2022/23			
COMPLAINTS						
Intake						
Received	2,034	2,810	3,246			
Closed without Referral for Investigation	593	770	900			
Referred to INV	1,457	1,989	2,286			
Pending (close of FY)	41	26	82			
Conviction / Arrest						
CONV Received	499	578	530			

CONV Closed Without Referral for			
Investigation	17	24	36
CONV Referred to INV	497	524	493
CONV Pending (close of FY)	0	10	17
Source of Complaint <sup>1</sup>			
Public	1,093	1,599	1,889
Licensee/Professional Groups	279	316	498
Governmental Agencies	394	475	397
Internal	683	886	830
Other	0	1	1
Anonymous	84	111	161
Average Time to Refer for Investigation (from receipt			
of complaint / conviction to referral for			
investigation)	11.26	10.65	12.41
Average Time to Closure (from receipt of complaint /			
conviction to closure at intake)	15.83	15.19	17.17
Average Time at Intake (from receipt of complaint /			
conviction to closure or referral for investigation)	12.35	11.81	13.61
INVESTIGATION			
Desk Investigations			
Opened	641	781	924
Closed	534	771	746
Average days to close (from assignment to			
investigation closure)	149.81	158.69	201.29
Pending (close of FY)	406	323	593
Non-Sworn Investigation			
Opened	1,311	1,732	1,854
Closed	1,417	1,605	1,712
Average days to close (from assignment to			
investigation closure)	369.02	238.07	227.67
Pending (close of FY)	1,252	1,333	1,390
Sworn Investigation			
Opened	2	0	1
Closed	1	0	0
Average days to close (from assignment to			
investigation closure)	166	N/A	N/A
Pending (close of FY)	1	1	2
All investigations <sup>2</sup>			
Opened	1,954	2,513	2,779

<sup>&</sup>lt;sup>1</sup> Source of complaint refers to complaints and convictions received. The summation of intake and convictions should match the total of source of complaint.

<sup>&</sup>lt;sup>2</sup> The summation of desk, non-sworn, and sworn investigations should match the total of all investigations.

Closed	1,952	2,376	2,458
Average days for all investigation outcomes			
(from start investigation to referral for			
prosecution or case closure without referral			
for prosecution)	322.53	212.43	229.16
Average days for investigation cases not			
referred for prosecution (from start			
investigation to case closure without referral			
for prosecution)	324.68	209.20	225.38
Average days for investigation when referring			
for prosecution (from start investigation to			
referral for prosecution)	298.27	248.97	257.58
Average days from receipt of complaint to			
referral for prosecution or case closure			
without referral for prosecution	355.92	234.85	252.48
Pending (close of FY)	1,619	1,693	1,985
CITATION AND FINE			
Citations Issued	931	1,274	1,053
Average Days to Complete (from complaint			
receipt / inspection conducted to citation			
issued)	435	340	327
Amount of Fines Assessed	\$786,100.00	\$2,026,575.00	\$3,393,500.00
Amount of Fines Reduced, Withdrawn,			
Dismissed	\$225,050.00	\$151,675.00	\$1,275,800.05
Amount Collected	\$706,730.00	\$1,095,610.52	\$1,708,099.51
CRIMINAL ACTION			
Referred for Criminal Prosecution	N/A	N/A	N/A
ACCUSATION			
Accusations Filed	169	139	127
Accusations Declined	0	0	0
Accusations Withdrawn	1	8	4
Accusations Dismissed	2	0	1
Average Days from Referral to Accusations			
Filed (from AG referral to Accusation filed)	201.83	206.91	147.48
INTERIM ACTION			
ISO & TRO Issued	12	2	8
PC 23 Orders Issued	3	0	13
Other Suspension/Restriction Orders Issued	0	4	4
Referred for Diversion	0	0	9
Petition to Compel Examination Ordered	2	2	2
DISCIPLINE	_	_	
AG Cases Initiated			
(cases referred to the AG in that year)	166	165	235
AG Cases Pending Pre-Accusation	100	103	
	1		
	ga	70	128
(close of FY)  AG Cases Pending Post-Accusation (close of	99	79	138

DISCIPLINARY OUTCOMES			
Revocation	83	57	62
Surrender	82	86	75
Suspension only	0	0	0
Probation with Suspension	1	1	4
Probation only	90	81	83
Public Reprimand / Public Reproval / Public			
Letter of Reprimand	80	57	23
Other	1	11	16
DISCIPLINARY ACTIONS			
Proposed Decision	30	30	19
Default Decision	69	53	49
Stipulations	191	176	144
Average Days to Complete After Accusation			
(from Accusation filed to imposing formal			
discipline)	317	208	193.46
Average Days from Closure of Investigation to			
Imposing Formal Discipline	604	571	575.58
Average Days to Impose Discipline (from			
complaint receipt to imposing formal			
discipline)	859	713	750.07
PROBATION			
Probations Completed	59	53	89
Probationers Pending (close of FY)	347	317	256
Probationers Tolled			36
Petitions to Revoke Probation / Accusation			
and Petition to Revoke Probation Filed	5	9	8
SUBSEQUENT DISCIPLINE <sup>3</sup>			
Probations Revoked	1	7	5
Probationers License Surrendered	3	2	1
Additional Probation Only	2	0	0
Suspension Only Added	0	0	0
Other Conditions Added Only	0	0	0
Other Probation Outcome	0	0	0
SUBSTANCE ABUSING LICENSEES (Drug testers only,			
PRP not included)			
Probationers Subject to Drug Testing	30	20	19
Drug Tests Ordered	841	867	665
Positive Drug Tests (positive test aka			
"relapse"; probationers' w/prescription not			
counted)	3	3	2
PETITIONS			
Petition for Termination or Modification			
Granted	7	19	13

 $<sup>^{\</sup>rm 3}$  Do not include these numbers in the Disciplinary Outcomes section above.

Petition for Termination or Modification			
Denied	0	3	8
Petition for Reinstatement Granted	3	5	0
Petition for Reinstatement Denied	1	2	2
DIVERSION (PRP)			
New Participants	9	6	9
Successful Completions	4	14	10
Participants (close of FY)	51	37	37
Terminations	10	5	8
Terminations for Public Threat	1	1	1
Drug Tests Ordered	2074	1750	1312
Positive Drug Tests	11	1	2

Table 10. Enforcement Aging						
	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24		
Closed Within:						
90 Days	383	602	396			
91 - 180 Days	427	622	561			
181 - 1 Year	604	699	1,125			
1 - 2 Years	459	362	286			
2 - 3 Years	74	71	59			
Over 3 Years	5	20	31			
Total Investigation						
Cases Closed	1,952	2,376	2,458			
Attorney General Case	s		<u> </u>			
Closed Within:						
0 - 1 Year	23	14	20			
1 - 2 Years	82	68	58			
2 - 3 Years	69	50	49			
3 - 4 Years	15	25	11			
Over 4 Years	30	22	24			
Total Attorney						
General Cases						
Closed	219	179	162			

Review of the data indicates a 3.7% overall decrease in average days from complaint receipt to imposing formal discipline. (878 average days in FY20/21, 903 average days in FY21/22, 845 average days in FY22/23)

#### Case Prioritization

The board uses a case prioritization system tailored to meet the diversity of individual licensees and practice settings. Supervising inspectors establish priorities for field investigations. Complaints categorized as priority 1 and 2 are the most serious and pose the highest risk to public health and safety. Examples

include reports of an impaired licensee on duty, prescription drug theft by a licensee, a pharmacy operating without a pharmacist on duty, large controlled substances losses, sterile compounding violations, and unauthorized furnishing of prescription drugs and/or controlled drugs. Where violations are confirmed, priority 1 and 2 complaints are generally referred to the Office of the Attorney General for formal disciplinary action. The board pursues these cases vigorously and seeks an appropriate penalty through an administrative hearing or stipulated settlement.

Priority 3 and 4 complaints are less serious and pose a lower risk to the health and safety of the general public. Examples include failure to provide patient consultation, prescription errors not involving patient harm, working with an expired license, and general noncompliance issues. Priority 3 and 4 complaints typically result in the issuance of a citation, a citation and fine, or a letter of admonishment.

In responses to changes in statutory authority case prioritization assessment is underway to ensure the current prioritization captures the various types of cases investigated by the Board.

The board believes its priorities are generally consistent with DCA's priorities; however, note some differences.

# **Mandatory Reporting**

State law establishes the following mandates for reports to the board:

Business and Professions Code Section 801(a) — Requires every insurer who provides liability insurance to a Board of Pharmacy licensee to report to the board any settlement or arbitration award over \$3,000 in a claim or action for damages for death or personal injury caused by the licensee's negligence, error, or omission in practice or for unauthorized professional services. A report, written and signed by all parties, must be submitted to the board within 30 days after service of the arbitration award on all parties.

Business and Professions Code Section 802 – Requires board licensees or their legal representatives to report every settlement or arbitration award over \$3,000 due to a "claim or action for damages for death or personal injury caused by negligence, error or omission in practice." The board receives notification of these settlements from the insurance company settling the claim or from a licensee's counsel.

Business and Professions Code Section 803 – Requires the clerk of a court that renders a judgment that a licensee has committed a crime; or is liable for any death or personal injury resulting in a judgment for an amount over \$30,000 caused by the licensee's negligence, error or omission in practice; or his or her rendering of unauthorized professional services, to report that judgment to the board within 10 days after the judgment is entered.

Business and Professions Code Section 4104 (c) —Requires every pharmacy report to the board within 14 days of the receipt or development of information that a licensed individual employed by or with the pharmacy has made or has received: (1) any admission by a licensed individual of chemical, mental, or physical impairment to the extent it affects his or her ability to practice pharmacy; or (2) any admission of theft, diversion, or self-use of dangerous drugs; or (3) any video or documentary evidence demonstrating chemical, mental, or physical impairment to the extent it affects his or her ability to practice pharmacy; or

(4) any video or documentary evidence demonstrating theft, diversion, or self-use of dangerous drugs; or

(5) any termination based on theft, diversion, or self-use of dangerous drugs.

Business and Professions Code Section 4126.9 – Requires notice to the board within 12 hours of any recall notice issued by a pharmacy for a nonsterile compounded drug product.

Business and Professions Code Section 4127.1 – Requires notice to the board within 12 hours of any recall notice issued by a pharmacy for sterile drug products it has compounded. Further, adverse effects reported or potentially attributable to a pharmacy's sterile drug products must also be reported to the board.

Business and Professions Code Section 4129.9 – Requires notice to the board within 24 hours of a recall notice under specified conditions.

Business and Professions Code Section 4169.1 – Requires a wholesaler to notify the board of any suspicious orders of controlled substances placed by a California-licensed pharmacy or wholesaler.

Title 16, California Code of Regulations Section 1715.6 – Requires a facility owner to report to the board within 30 days of the discovery of a loss of specified amounts controlled substance. The board educates licensees about these mandatory reporting requirements through its newsletter and through public discussions. Further, some of the reporting requirements are also included in the board's self-assessment forms.

The board is unable to track settlement amounts individually and notes that settlement amounts are sometimes confidential.

#### Settlements Entered with Licensees

The board does not have authority to settle cases in advance of filing of an accusation. The board's Enforcement Committee and Board previously considered such a change, but ultimately determined it was not appropriate for the Board.

The number of cases, post-accusation, that were settled over the past four years is provided in the table below.

#### Post-Accusation Case Settlements

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24	Total
Settlements	132	92	136		
Hearing	21	15	32		

The board settles approximately 90 percent of its disciplinary cases.

#### Statute of Limitations

While the board is not bound by a statute of limitations, it recognizes consumer protection as its highest priority and therefore strives to investigate each complaint as quickly as possible. In addition, the board sets standards to monitor its performance.

# Unlicensed Activity and the Underground Economy

The board aggressively investigates unlicensed activity. The table below quantifies investigations involving allegations of unlicensed activity.

#### **Unlicensed Activity Investigations**

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24	Total Indicated
Investigations	83	78	54		

Examples of unlicensed activity include individuals or businesses operating without a license; unlicensed out-of-state operators providing services to Californians; and consumers buying drugs online from unlicensed vendors. The board currently has the authority to issue a fine of up to \$5,000 for unlicensed activity as well as the authority to issue a cease and desist. Regrettably, these actions do not serve as a sufficient deterrent to unlicensed activity. The board is currently considering development of a proposal to increase the board's fine authority for such violations.

#### Citation and Fine

The board uses its authority to issue citations, citations with fines, and letters of admonition to deal with important violations that warrant correction but not license sanctions such as probation, suspension or revocation. The chart below shows the number of citations, citations and fines, and letters of admonishment that have been issued in the last four years.

#### Citation and Fines/Letters of Admonishment

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
Letters of Admonishment	452	266	173	
Citations with No Fine	401	451	390	
Citation with Fine	533	823	663	
Fines Assessed	\$787,100	\$2,029,012	\$3,393,500	
Fines Collected	\$711,729	\$1,093,911	\$1,708,100	

The board may issue citations containing orders of abatement. The abatement order may require the cited licensee to detail plans to comply with Pharmacy Law. The board has been using these orders routinely since May 2018. Compliance with orders typically results in either a reduction or forgiveness of the fine.

The board has authority to issue citations, citations with fines, and letters of admonishment for any violation of pharmacy law. The board may issue citations of up to \$5,000 for:

- 1. Any violation of Pharmacy Law (Business and Professions Code 4000 et seq.).
- 2. A violation of a regulation adopted by the board.
- 3. A violation of the Confidentiality of Medical Information Act (Civil Code 56 et seq.).
- 4. Defaulting on a United States Department of Health and Human Services education loan (capped at \$2,500).
- 5. A violation of other statutes or regulations for which the board may issue a citation.

For most violations, the board is limited to issuing fines of \$5,000 to each licensee investigated in a single case. This means that the board could issue fines of up to \$5,000 each to a pharmacy, pharmacist, and pharmacist-in-charge involved in the same violations of pharmacy law; however, the board rarely does so.

The board generally assesses the highest fines for the most serious violations. Pharmacy Law details the factors that must be considered when assessing fines, including:

- Gravity of the violation.
- Good or bad faith of the cited person or entity.
- History of previous violations.
- Evidence that the violation was or was not willful.
- Extent to which the cited person or entity has cooperated with the board's investigation.
- Extent to which the cited person or entity has mitigated or attempted to mitigate any damage or injury caused by the violation.
- Number of violations found in the investigation.
- Other matters as may be appropriate.

The board has statutory authority to issue higher fines for specific violations. For example, the board can issue fines of \$25,000 per prescription for internet sales of drugs where no underlying appropriate examination occurred (California Business and Professions Code section 4067). In such cases, the pharmacy is not practicing pharmacy but is a drug seller to the internet operator.

The board also has the authority to issue fines of up to \$5,000 per occurrence for specified violations. For example, California Business and Professions Code 4126.5 allows the board to issue fines of up to \$5,000 per occurrence for violations involving furnishing of dangerous drugs to an unauthorized entity.

Effective January 1, 2022, the board was given authority to bring an action for fines for repeated violations of materially similar provisions of this chapter within five years by three or more pharmacies operating under common ownership or management within a chain community pharmacy, as follows: a third and, or subsequent violation may be punished by an administrative fine not to exceed one hundred thousand dollars (\$100,000) per violation. Additionally, the board may bring an action against a chain community

pharmacy operating under common ownership or management for fines not to exceed one hundred fifty thousand dollars (\$150,000) for any violation of this chapter demonstrated to be the result of a written policy or which was expressly encouraged by the common owner or manager.

# **Appeal Process**

Licensees who are issued a citation with or without a fine or a letter of admonishment may request an informal office conference. The office conference allows the licensee the opportunity to present additional or mitigating information to the board's executive officer or designee and a supervising inspector. Upon conclusion, staff may affirm, modify, or dismiss the citation or affirm or dismiss the letter of admonishment.

In addition to an office conference, a licensee may submit a formal appeal to the board within 30 days of the issuance of a citation. Appeals are conducted pursuant to the Administrative Procedure Act by an administrative law judge who renders a decision, which is presented to the board for adoption or rejection. Letters of admonishment are not subject to the provisions of the Administrative Procedures Act.

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
Informal Office Conference	180	211	185	
Formal Appeal	29	34	49	

# Five Most Common Violations for which Citations are Issued

#### 2020/21

- 1. Medication error
- 2. A licensed wholesaler acting as a reverse distributor
- 3. Unauthorized disclosure of prescription and medical information in the pharmacy
- 4. Failure to provide oral consultation to a patient whenever the prescription drug has not been previously dispensed to a patient
- 5. Operational standards and security relating to maintaining facilities

#### 2021/22

- 1. Medication error
- 2. Failure to report change of pharmacist-in-charge
- 3. Unauthorized disclosure of prescription and medical information in the pharmacy
- 4. Unprofessional conduct, requirements for pharmacies employing pharmacy technicians
- 5. Operational standards and security relating to maintaining facilities

#### 2022/23

- 1. Medication Error
- 2. Unprofessional Conduct
- 3. Failure to Report Change of PIC
- 4. Operational standards and security relating to maintaining facilities

#### 5. Duty to Consult

# Average Fine Pre- and Post-Appeal

FY 2020/21	Number Appealed	Pre-Appeal Average	Post-Appeal Average
General Authority	23	\$1,437	\$828
BPC 4067	0	N/A	N/A
BPC 4126.5	1	\$0	\$0
BPC 4169	0	N/A	N/A

FY 2021/22	Number	Pre-Appeal	Post-Appeal
	Appealed	Average	Average
General Authority	26	\$683	\$663
BPC 4067	0	N/A	N/A
BPC 4126.5	0	N/A	N/A
BPC 4169	0	N/A	N/A
BPC 4317.5	2	\$225,000	N/A

FY 2022/23	Number Appealed	Pre-Appeal Average	Post-Appeal Average
General Authority	20	\$1,544	\$763
BPC 4067	0	N/A	N/A
BPC 4126.5	0	N/A	N/A
BPC 4169	0	N/A	N/A
BPC 4317.5*	2	\$225,000	\$120,000

<sup>\*</sup>Citations are under appeal.

# Franchise Tax Board Intercepts

DCA notifies the board when the Franchise Tax Board (FTB) has intercepted California tax refunds to pay monies owed to the board. (The FTB cannot intercept corporation or partnership funds but can intercept

funds from sole ownership.) Since July 1, 2020, the board opened 23 intercept accounts and closed 61 accounts. FTB referrals were suspended from April 2020 through July 2021 due to COVID.

# **Cost Recovery**

California Business and Professions Code section 125.3 authorizes the recovery of investigation costs associated with the formal discipline of a license.

The board's policy is to seek cost recovery in all cases where authorized. Reimbursement of board costs is a standard term of probation listed in the board's *Disciplinary Guidelines*. The board seeks cost recovery in settlements as well as administrative decisions. In cases resulting in surrender or revocation of license, the board seeks costs but does not generally require payment unless the licensee seeks relicensing or reinstatement of license. Costs awarded to the board in probation cases typically are paid in installments and may not be fully collected until the end of the probation period - perhaps three to five years.

It is important to note that administrative law judges do not always award costs to the board.

The board does not have the authority to seek cost recovery in a statement of issues case (where an applicant has appealed the denial of his or her application).

The board has not used the Intercept Program to collect cost recovery. Rather, when a licensee on probation fails to submit cost recovery payments, generally the board will pursue further administrative discipline for violation of probation. Where a license is revoked, typically costs are due upon reinstatement or reapplication.

#### Costs Awarded

	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
Revoked Licenses	\$226,115	\$104,951	\$41,922	
Surrendered Licenses	\$592,434	\$1,248,276	\$573,740	
Licenses on Probation	\$801,832	\$994,898	\$673,214	
Public Reproval	\$437,605	\$476,305	\$109,095	

#### Restitution

The board has no legal authority to order restitution. Instead, the board orders community service as a way to compensate the public for violations of Pharmacy Law. As an example, the Board will include as part of a stipulated settlement a donation of either money or product to specified entities.

Table 11. Cost Recovery <sup>4</sup> (list dollars in thousands					
	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24	
Total Enforcement Expenditures	\$5,362,229	\$4,372,294	\$4,203,149		
Potential Cases for Recovery *	220	202	113		
Cases Recovery Ordered	180	153	113		
Amount of Cost Recovery Ordered	2,475,038	2,845,000	1,430,028		
Amount Collected	1,578,428	2,283,704	1,359,280		

<sup>\*</sup>Cases in which disciplinary action has been taken based on violation of the license practice act.

Table 12. Restitution (list dollars in thousands)				
	FY 2020/21	FY 2021/22	FY 2022/23	FY 2023/24
Amount Ordered	n/a	n/a	n/a	n/a
Amount Collected	n/a	n/a	n/a	n/a

<sup>&</sup>lt;sup>4</sup> Cost recovery may include information from prior fiscal years.

# Internet Use and Meeting Materials

The board uses the internet as its primary communication channel with the public. Electronic communication is the fastest way to disseminate important information on policy, regulatory, enforcement and consumer matters to patients, licensees and stakeholders.

All announcements, activities, documents and public records of importance to consumers and licensees – including meetings, rulemakings, new laws and regulations, drug recalls, licensure forms, reports and publications, and enforcement actions – are posted on the board's website, <a href="www.pharmacy.ca.gov">www.pharmacy.ca.gov</a>. In addition, notices with links to important information are emailed via six separate listservs. Board licensees are required by law to enroll in the Board's listservs.

The board posts extensive meeting materials – including agendas, background information, action items and minutes – on a dedicated section for <u>board and committee meetings</u>. Agendas are posted at least 10 days before meetings, and materials typically are posted five days before meetings. Within two days after meetings, the board posts a list of action items from the meeting online and also releases the information to the public via subscriber alerts.

Draft minutes are included in the meeting materials for the subsequent quarterly board meeting, and final meeting minutes are posted online after they have been reviewed and approved at a board meeting. The same timetable applies to materials for committee meetings.

Meeting materials remain on board meetings page for several years, currently from January 2015 to present. The board also maintains a complete archive of meeting agendas and minutes from 1999 through 2014 on its website.

In addition to posting comprehensive meeting materials online, the board releases a monthly news roundup via subscriber alerts in an effort to keep consumers, licensees, and stakeholders informed about important activities and events.

#### Livestream

In response to the COVID-19 pandemic, the Board transitions to teleconference meetings via WebEx in addition to livestream of meeting which is provided by Department of Consumer Affairs. The transition to the WebEx meeting platform has significantly increased attendance at meetings and resulted in cost savings to the Board.

Webcast recordings are posted online on DCA's YouTube page; links to the recordings are posted on the board's meeting page. Currently, DCA maintains webcasts online for three years.

# **Meeting Schedule**

The board schedules two-day meetings each quarter and one-day meetings in various months. The board approves an annual calendar typically in July for meetings throughout the following calendar year, and the schedule is posted upon approval. Committees typically meet once per quarter on dates approved by the committee chairperson and immediately posted online.

Occasionally, additional board or committee meetings are scheduled respond to urgent matters. These meeting dates are posted online as soon as they are established, and alerts are emailed immediately to listsery subscribers.

Complaint Disclosure Policy and Posting of Enforcement Actions

The board's complaint disclosure policy is consistent with DCA's *Recommended Minimum Standards for Consumer Complaint Disclosure*.

In addition, the board posts accusations and disciplinary actions consistent with DCA's *Web Site Posting of Accusations and Disciplinary Actions* (May 21, 2010). An "Enforcement Actions" link in the "Quick Hits" column on the homepage leads to additional webpages that list by month each pending accusation, disciplinary action, and immediate protection order against licensees. Each case identifies licensees by name and number, enabling consumers to search online and find all the public documents available in the case.

Lesser administrative actions – including citations, fines, and letters of admonishment – are not posted online. However, the information is public and available from the board upon written request consistent with the Board's records retention schedule.

The website also includes explanatory information about public disclosure of disciplinary records, the board's public disclosure policy, and disciplinary terminology.

#### Public Information about Licensees

The board provides key information online to enable the public to quickly search and verify the status of a license and any disciplinary action against a licensee. A link to the license search function on the board's website is prominently listed in the "Quick Hits" column on the homepage.

Website visitors can perform a license search and find the following information about pharmacists, pharmacy technicians, pharmacist interns, and designated representatives:

Licensee name.
License type.
License number.
License status.

License issue date.

License expiration date.

In the interest of licensee safety, the board removed addresses of record for individual licensees. However, addresses of record are public information that remain available by contacting the board.

The same license information is provided for licensed sites, such as pharmacies, clinics, hospitals, and other locations. Site licenses also include links to the license of any individual required to be in charge of the site. (For example, pharmacies must have a designated pharmacist-in-charge.)

Each license record also discloses any formal discipline against the licensee, along with a link to public documents in the case. Information about lesser administrative actions – including citations, fines, and letters of admonishment – are not linked to licensees but is available by contacting the board.

#### Consumer Outreach

As a consumer protection agency, the board relies on a variety of important communication tools to reach and educate the public.

The board's website remains the primary channel for mass communication. Recently the board created a homepage section, "Important Information for Consumers," to highlight news, brochures and other useful information for consumers in an easy-to-find location. The board also has added a "News Archive" section to the website to maintain news releases issued by date as a resource for public information.

In addition to its website, the board has a Twitter social media account to reach individuals who receive information and communicate on mobile phones. To keep the general public informed about important activities and events, the board has a dedicated subscriber alert listserv to disseminate general news and information to consumers, news media, stakeholders and other non-licensee audiences.

The board also has stepped up its efforts to raise public awareness about prescription drug abuse and recently delivered a campaigned focused on the topic during September 2022. The campaign included themes for each week, including access to care, access to naloxone, etc.

# Section 7 – Online Practice Issues

# Patients Buying Drugs Online

As the cost of prescription drugs continues to rise, it is not uncommon for consumers to look for cheaper medications online. In addition, unlicensed and unregulated entities often advertise cheaper drugs in unsolicited emails. Although buying prescription drugs online can be done safely, it also can be very dangerous.

Unfortunately, the board is unable to investigate many complaints involving unlicensed online activity. It is usually difficult to identify who is operating online pharmacies or where they are located, because many operate offshore and outside the board's jurisdiction. Often the board will refer these complaints to the FDA and the NABP for investigation.

# **Pharmacies Filling Internet Prescriptions**

Board inspectors have uncovered some California-licensed pharmacies filling prescriptions for website operators without a legitimate prescription. In many cases, entrepreneurs who are not pharmacists establish websites selling prescription drugs without a prescription or to consumers who simply complete an online questionnaire; the questionnaire then is purportedly reviewed by a prescriber in one state and shipped to a pharmacy to fill in another state without an appropriate medical examination. In these cases, consumers receive medication from an appropriately licensed pharmacy but without the medical supervision required for prescription medication.

Recently some pharmacies have developed policies to automatically reject prescriptions for certain controlled medications that are prescribed via telehealth. Such actions must be evaluated by the Board.

# Offshoring of Prescription Dispensing Functions

The board has identified efforts by a growing number of pharmacies to reduce operating costs by "offshoring" portions of the prescription dispensing process. The board uses its cease-and-desist authority against these operators.

#### Section 8 -

#### **Workforce Development and Job Creation**

#### This section will be updated prior to the final submission

- 1. What actions has the board taken in terms of workforce development?
- 2. Describe any assessment the board has conducted on the impact of licensing delays.
- 3. Describe the board's efforts to work with schools to inform potential licensees of the licensing requirements and licensing process.

Board staff provide annual presentations for students as California schools of pharmacy if requested. In FY. 2021/22 the following presentations were provided.

- Pharmacy school graduates 6 presentations.
- Incoming intern students 2 presentations

Further, one of the Board's strategic objectives is to develop an educational program for interns.

- 4. Describe any barriers to licensure and/or employment the board believes exist.
- 5. Provide any workforce development data collected by the board, such as:
  - a. Workforce shortages
  - b. Successful training programs.

#### Section 9 -

#### **Current Issues**

This section will be prepared as part of the final report

- 6. What is the status of the board's implementation of the Uniform Standards for Substance Abusing Licensees? Static
- 7. What is the status of the board's implementation of the Consumer Protection Enforcement Initiative (CPEI) regulations? Static
- 8. Describe how the board is participating in development of BreEZe and any other secondary IT issues affecting the board. N/A
  - a. Is the board utilizing BreEZe? What Release was the board included in? What is the status of the board's change requests?
  - b. If the board is not utilizing BreEZe, what is the board's plan for future IT needs? What discussions has the board had with DCA about IT needs and options? What is the board's understanding of Release 3 boards? Is the board currently using a bridge or workaround system?

Section 10 -

**Board Actions and Responses to COVID-19.** 

# **Teleworking Policy**

In March 2020, the Board's office closed to the public and staff transitioned to full time or a rotational teleworking schedule. Prior to reopening offices to the public and resumption of some core functions, including inspections, reopening plans were developed and training provided to all staff. There are several limiting factors that must be addressed long term to sustain this rotational teleworking schedule, most notably the Board's reliance on paper to conduct many of its essential licensing functions. Operationally all management staff has completed 6 hours of mandated training in the hybrid workforce and SWOT analyses were performed for each job duty statement to determine the long-term teleworking strategies for each of the office positions. This position specific approach has allowed the Board to manage ongoing teleworking for staff while continuing to balance office operations. Recently, the Department of General Services released its Statewide Telework Policy. Since that time, office staff have completed updated agreements. As the Board's continues to adapt to this new model, employees have demonstrated great flexibility.

#### DCA Director's Waivers

The Board provided technical input on waiver requests impacting its licensees. The DCA Director issued several waivers to expand access points for critical patient care including COVID testing, vaccination administration and access to Paxlovid. Such waivers include:

<u>DCA Waiver DCA-22-217</u> Waiving Restrictions of Pharmacists Independently Initiating and Furnishing Paxlovid to Individual Patients. Under the provisions of the waiver, pharmacists may independently initiate and furnish Paxlovid for individual patients subject to specified conditions. There is no expiration date included on this wavier. Board staff will monitor for implementation issues and if necessary, develop guidance to assist pharmacists in understanding the provisions of the waiver.

<u>DCA Waiver DCA-21-142</u> Order Waiving Staffing Ratio of Pharmacists to Pharmacy Technicians Relating to Administering COVID-19 Vaccines. Under the provisions of this waiver, pharmacists engaged exclusively in initiating and administering COVID-19 vaccines, and pharmacy technicians engaged exclusively in administering COVID-19 vaccines under the direct supervision and control of such pharmacist, may increase the ratio to allow one pharmacist to supervise no more than two pharmacy technicians.

<u>DCA-20-103</u>, an order that waived provisions that prohibit pharmacy technicians from administering COVID-19 vaccines under specified conditions. Further, consistent with the mobile pharmacy licenses under the provisions of BPC 4062, a process was established for pharmacies wishing to use pharmacy technicians as part of the vaccination team outside of the license pharmacy. To date the Board has approved over 3,284 mobile pharmacies for this purpose.

<u>DCA Waiver-20-44</u>, an order that waives restrictions on pharmacies, pharmacists, and pharmacy technicians related to ordering, collecting specimens for, and performing COVID-19 Tests.

# **Board of Pharmacy Waivers**

In addition to waivers issued by the DCA Director, the Board has relied heavily on its unique ability to issue waivers of pharmacy law and its regulation consistent with the provisions of Business and Professions Code section 4062. This authority has allowed the Board to respond quickly to the changing climate of the pandemic since early on, to ensure continuity of patient care and provisions for public health. The Board has issued broad waivers as well as site specific waivers. Although the majority of the waivers have expired, four remain in place including:

#### 1. Mass Vaccination Sites

**Summary**: Provides for the storage and redistribution of COVID-19 vaccines in compliance with CDPH and CDC Guidance Related to Mass Vaccination Sites and allows for the use of pharmacy technicians as part of the vaccination team at such sites sponsored by state or local authorities directly or through contractual arrangements with third parties. Further, this allows for an increase in the ratio of pharmacist to pharmacy technicians under specified conditions.

Effective: April 21, 2021

**Expiration**: December 31, 2022, or 30 days following termination of the declared disaster, whichever is **sooner**.

#### 2. Remote Processing

**Summary**: Waives limitations on the provisions of remote order entry.

Reinstated: September 3, 2021

**Expires**: December 31, 2021, or 30 days after the emergency declaration is lifted, whichever is **later**.

3. <u>Staffing Ratio of Pharmacists to Intern Pharmacists and General Supervision – Immunizations (BPC section 4114)</u>

**Summary**: Increases the ratio of pharmacists to intern pharmacist under specified conditions.

Amended and Reissued: October 14, 2021

**Expiration**: December 31, 2022, or 30 days after the emergency declaration is lifted, whichever is **sooner**.

4. <u>Prescriber Dispensing of COVID-19 Oral Therapeutic Medication to Emergency Room Patient</u> (Including BPC sections 4068(a)(1), 4068(a)(5), 4068(a)(6) and 4076.5

**Summary**: Lifts prohibition against a prescriber dispensing FDA authorized or approved COVID-19

therapeutics to an emergency room patient under specified conditions.

Effective: January 14, 2022

**Expiration**: 30 days following the end of the declared disaster.

# **Temporary Licenses**

In addition to approving waivers, the Board has worked to issue temporary licenses to address distribution of PPE, ventilators, and vaccinations, as well as temporary licenses for surge locations and other pharmacies. The Board issued 41 temporary licenses.

# Changes Sought in Response to COVID

The Board evaluated waivers approved to determine if permanent changes to the law are appropriate and seeks changes. As an example, the Board updated its vaccine regulation to remove a reporting requirement unique to pharmacists that created a barrier to COVID vaccine administration.

#### Section 11 -

**Board Action and Response to Prior Sunset Issues** 

#### This section will be prepared for the final report.

Include the following:

- 1. Background information concerning the issue as it pertains to the board.
- 2. Short discussion of recommendations made by the Committees during prior sunset review.
- 3. What action the board took in response to the recommendation or findings made under prior sunset review.
- 4. Any recommendations the board has for dealing with the issue, if appropriate.

## Section 12 – New Issues

#### This section will be prepared for the final report.

This is the opportunity for the board to inform the Committees of solutions to issues identified by the board and by the Committees. Provide a short discussion of each of the outstanding issues, and the board's recommendation for action that could be taken by the board, by DCA or by the Legislature to resolve these issues (i.e., policy direction, budget changes, legislative changes) for each of the following:

- 1. Issues raised under prior Sunset Review that have not been addressed.
- 2. New issues identified by the board in this report.
- 3. New issues not previously discussed in this report.
- 4. New issues raised by the Committees.

# Section 13-Attachments

#### The below items will be prepared for the final report.

Please provide the following attachments:

- A. Board's administrative manual.
- B. Current organizational chart showing relationship of committees to the board and membership of each committee (cf., Section 1, Question 1).
- C. Major studies, if any (cf., Section 1, Question 4).
- D. Year-end organization charts for last four fiscal years. Each chart should include number of staff by classifications assigned to each major program area (licensing, enforcement, administration, etc.) (cf., Section 3, Question 15).