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COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF STATE  
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS

**F I N A L M I N U T E S**

MEETING OF:

**STATE BOARD OF PHARMACY  
VIA VIDEOCONFERENCE**

TIME: 10:34 A.M.

PENNSYLVANIA DEPARTMENT OF STATE

February 8, 2022



State Board of Pharmacy  
February 8, 2022

ALSO PRESENT: (cont.)

Elizabeth Shipula, Pharm.D., Chewy  
Jacquelyn Sassaman, Pentec Health  
Joshua Finger, Pharm.D., Enclara Pharmacia  
Judy Kutchman, R.Ph., AllianceRx Walgreens Prime  
Julian Kleberg, Pharmacy Intern  
Kimberly Mehta, Pharm.D., MPH, Director of Medication  
Safety and Regulatory, Allegheny Health Network  
Larry Jones, Executive Director, Pennsylvania  
Society of Health-System Pharmacists  
Laura Romeo, Pharmacist-in-Charge at ConnectiveRx,  
Careform Pharmacy  
Maeve Tucker, Pharmacy Intern  
Patrick Lavella, R.Ph., President-elect, Pennsylvania  
Pharmacist Association,  
Robert B. Frankil, R.Ph., Executive Director,  
Philadelphia Association of Retail Druggists  
Robin Becker, Assistant Director, Pharmacy Operations  
at Thomas Jefferson University Hospitals  
Thomas Brown, Pharm.D., Director, Health Ventures,  
Thomas Jefferson University Hospitals  
Samantha Sabatini  
Taylor Makatura, Pharm.D., R.Ph.  
Tim  
Ursula Chizhik, Vice President of Quality & Regulatory  
Affairs at FLAVORx  
Victoria Elliott, R.Ph., MBA, CAE, CEO, Pennsylvania  
Pharmacists Association  
Walter Valentine, Enclara Pharmacia  
Barbara Knightly, Executive Vice President of  
Regulatory Affairs and Quality Operations, Pentec  
Health & International Academy of Compounding  
Pharmacists  
Catherine Lutz, Pharmacy Inspector, Bureau of  
Enforcement and Investigation, Department of State  
Steven Zahn, Pharmacy Inspector, Bureau of Enforcement  
and Investigation, Department of State  
Tamarah Walker  
Margie Lydon  
John DeJames

1 \*\*\*

2 State Board of Pharmacy

3 February 8, 2022

4 \*\*\*

5 [Pursuant to Section 708(a)(5) of the Sunshine Act, at  
6 9:00 a.m., the Board entered into Executive Session  
7 with Juan A. Ruiz, Esquire, Board Counsel, to receive  
8 legal advice and engage in quasi-judicial  
9 deliberations. The Board returned to open session at  
10 10:30 a.m.]

11 \*\*\*

12 Meeting Instructions

13 [Melanie Zimmerman, R.Ph., Executive Secretary,  
14 provided instructions to be followed during the  
15 virtual meeting.]

16 \*\*\*

17 [Juan A. Ruiz, Esquire, Board Counsel, reminded  
18 everyone that the meeting was being recorded, and  
19 voluntary participation constitutes consent to be  
20 recorded.]

21 \*\*\*

22 The regularly scheduled meeting of the State  
23 Board of Pharmacy was held on Tuesday, February 8,  
24 2022. Janet Getzey Hart, R.Ph., Chairperson, called  
25 the meeting to order at 10:34 a.m. and turned the

1 meeting over to Vice Chair Christine Roussel.

2 \*\*\*

3 VICE CHAIR ROUSSEL ASSUMED THE CHAIR

4 \*\*\*

5 Introduction of the Board Members

6 [Christine Roussel, Pharm.D., BCOP, BCSCP, Vice Chair,  
7 requested an introduction of Board members.]

8 \*\*\*

9 Introduction of Attendees

10 [Melanie Zimmerman, R.Ph., Executive Secretary,  
11 provided an introduction of audience members in  
12 attendance.]

13 \*\*\*

14 [Christine Roussel, Pharm.D., BCOP, BCSCP, Vice Chair,  
15 welcomed Arion Claggett to his new role and  
16 congratulated and thanked him for being the new  
17 commissioner.]

18 Arion R. Claggett, Acting Commissioner, Bureau of  
19 Professional and Occupational Affairs, introduced  
20 himself and provided a brief summary of his  
21 professional background.]

22 \*\*\*

23 Approval of Agenda

24 VICE CHAIR ROUSSEL:

25 Does anybody have a motion to approve the

1 agenda?

2 MS. TALBOTT:

3 I would make that motion that we approve  
4 the agenda.

5 MR. GREENE:

6 Second.

7 VICE CHAIR ROUSSEL:

8 All in favor? Any opposed?

9 [The motion carried unanimously.]

10 \*\*\*

11 Approval of Minutes

12 VICE CHAIR ROUSSEL:

13 We have the minutes from the Board  
14 meeting for December.

15 Does anyone have any proposed edits  
16 to the meeting or any amendments?

17 MS. TALBOTT:

18 I make that motion that we approve the  
19 minutes from December 21.

20 MR. GREENE:

21 Second.

22 VICE CHAIR ROUSSEL:

23 Any discussion? All in favor, aye? Any  
24 opposed or abstentions?

25 [The motion carried unanimously.]

\*\*\*

1  
2 Appointment - Prosecution Division Annual Report  
3 Presentation

4 [Carolyn A. DeLaurentis, Esquire, Deputy Chief  
5 Counsel, Prosecution Division, provided a summary of  
6 the prosecution division's caseload during 2021.

7 Ms. DeLaurentis informed the Board that 982 cases  
8 were opened in 2021, which an increase from 2020 at  
9 752 for the State Board of Pharmacy. She mentioned  
10 being proud of prosecution, counsel, and the boards  
11 for all of their work. She noted closing 841 cases in  
12 2021 and 611 cases in 2020.

13 Ms. DeLaurentis noted being unable to tell the  
14 Board how many cases are open for the Board as of  
15 January 1, 2022, but will provide that number at a  
16 later time.

17 Ms. DeLaurentis addressed enforcement actions and  
18 thanked the prosecution division, the Bureau of  
19 Enforcement and Investigation (BEI), counsel division,  
20 and the boards for their combined effort. She  
21 reported 104 cases resulted in discipline in 2021 with  
22 26 fines, 55 Act 48 or citation fines, 3 suspension, 3  
23 automatic suspensions, 9 reprimands, 8 voluntary  
24 surrenders, 3 revocations, and 8 probation cases. She  
25 also reported 295 warning letters in 2021, which was

1 an increase from 200 in 2020.

2 Ms. Talbott asked whether the increase from 2020  
3 to 2021 was due to lack of inspections because of  
4 COVID during the lockdown in 2020.

5 Mr. Michalowski explained that there were delayed  
6 inspections mid-year and everybody was caught up by  
7 the end of the year.

8 Mr. Michalowski noted an increase in the  
9 administrative side of things because the industry was  
10 so incredibly busy and thanked the pharmacy industry  
11 for being a self-policing industry. He mentioned a  
12 lot of changes with pharmacy managers and people  
13 moving around during COVID, where someone reported  
14 those changes late and were just issued warning  
15 letters.

16 Mr. Michalowski addressed the stress everybody is  
17 going through during COVID, noting it might be another  
18 reason why there are more warning letters and more  
19 cases. He stated that COVID was another reason for  
20 people being hypersensitive but withdrew their  
21 complaint after the Bureau of Enforcement and  
22 Investigation (BEI) talked to them or the pharmacist  
23 apologized.

24 Ms. DeLaurentis addressed COVID-related cases,  
25 noting that one complaint may result in more than one



1 case being opened. She reported 1,223 cases were  
2 opened in the prosecution division regarding COVID  
3 complaints in 2020 with 24 of those cases for the  
4 State Board of Pharmacy. She also reported a  
5 significant decrease in COVID-related complaints in  
6 2021, mostly for business-related boards but an  
7 increase in healthcare-related boards with 543 COVID-  
8 related cases and 61 of those for the Board.

9 Ms. DeLaurentis explained that COVID-related  
10 complaints can sometimes just be a misunderstanding,  
11 noting Mr. Michalowski reviews every single COVID case  
12 for pharmacy and that staff has been processing those  
13 as quickly as possible.

14 Mr. Michalowski further explained that it is very  
15 easy to demarcate the pharmacy complaints, so the  
16 pharmacy-related COVID complaints in 2020 would have  
17 been all masking and sanitation, but the vast majority  
18 in 2021 are all related to vaccines and would almost  
19 always involve both a pharmacy and pharmacist  
20 complaint.

21 Ms. DeLaurentis credited the profession,  
22 acknowledging the stress of the past two years and  
23 thanked Mr. Michalowski and his team for handling all  
24 of those cases.

25 Ms. DeLaurentis noted a record number of cases

1 opened last year and thanked the administrative  
2 assistants for processing so many files. She reported  
3 18,363 cases were opened in 2021, which is an increase  
4 from 2020 at 13,394.

5 Ms. DeLaurentis reported 15,994 cases were closed  
6 in 2021 and 13,274 in 2020. She noted 15,141 open  
7 cases as of January 1, 2022, and thanked Board counsel  
8 and prosecutors for their collective effort.

9 Vice Chair Roussel thanked Ms. DeLaurentis and  
10 her team for their amazing amount of work.]

11 \*\*\*

12 Report of Prosecutorial Division

13 [Glenn P. Masser, Esquire, Board Prosecutor, presented  
14 the Consent Agreements for Case No. 18-54-010788; Case  
15 Nos. 18-54-012531, 18-54-012534, 20-54-004984 & 21-54-  
16 011561; Case No. 19-54-012928; and Case No. 21-54-  
17 010951.]

18 \*\*\*

19 Appointment - Pennsylvania Insurance Department - No  
20 Surprises Act

21 [Katie Merritt, LSW, Director of Policy and Planning,  
22 Pennsylvania Insurance Department (PID), presented to  
23 the Board to discuss the No Surprises Act that became  
24 effective January 1, 2022, and how it may affect the  
25 Board or some of the constituents the Board serves.

1 David Buono, Deputy Insurance Commissioner,  
2 Office of Market Regulation, Pennsylvania Insurance  
3 Department, informed the Board that material presented  
4 today was prepared by the Commonwealth of Pennsylvania  
5 Insurance Department based on the law, regulations,  
6 and guidance as of December 1, 2021.

7 Mr. Buono addressed the No Surprises Act (NSA),  
8 noting that the disclosure requirement applies to all  
9 health care providers, the provider directory  
10 requirement applies to all healthcare providers  
11 applicable only to providers in-network for major  
12 medical insurance policies, and the Good Faith  
13 Estimate requirement applies to all health care  
14 providers.

15 Mr. Buono commented that health plans that cover  
16 any benefits for emergency services, including air  
17 ambulance, under the No Surprises Act, requires  
18 emergency services to be covered without any prior  
19 authorization or regardless of whether a provider or  
20 facility is in-network.

21 Mr. Buono also commented that if a health plan  
22 covers any benefits for nonemergency services related  
23 to a visit in an in-network facility, the No Surprises  
24 Act requires patients be protected when they have  
25 little or no control over who provides their care.

1 Mr. Buono stated that ancillary providers, such  
2 as labs or doctors, involved in a surgery that the  
3 patient does not select may not balance bill. He  
4 noted cost-sharing for ancillary providers is treated  
5 as in-network. He commented that the No Surprises Act  
6 protects people from unexpected bills for emergency  
7 services, air ambulance services, and certain  
8 nonemergency services related to a visit to a  
9 facility.

10 Mr. Buono mentioned that emergency ground  
11 ambulance services are not included and deferred to  
12 further study at the federal level. He stated that  
13 nonemergency services for some ancillary care at an  
14 in-network facility is treated as in-network in all  
15 circumstances. He reported that other nonemergency  
16 services may only be billed as out of network with  
17 advanced notice and consent from the patient.

18 Mr. Buono noted the No Surprises Act limits the  
19 high out-of-network cost-sharing, where patient cost-  
20 sharing, such as coinsurance or deductible, cannot be  
21 higher than if such services were provided by an in-  
22 network doctor and any coinsurance or deductible must  
23 be based on in-network provider rates.

24 Mr. Buono stated that No Surprises Act billing  
25 protection applies if coverage is through an employer,

1 state-based marketplace Pennie, or directly through an  
2 individual market health insurance company. He  
3 mentioned that the act does not apply to Medicare,  
4 Medicaid, Indian Health Services, Veterans Affairs, or  
5 TRICARE.

6 Mr. Buono addressed plans that do not have the  
7 balance billing protection, including indemnity or  
8 accepted benefit plan enrollees because it is not  
9 individual market coverage and does not typically have  
10 a network. He noted short-term limited duration plan  
11 enrollees, health care sharing ministries, the Amish,  
12 or uninsured are not individual market coverage.

13 Mr. Buono addressed uninsured individuals, noting  
14 providers are required to provide a Good Faith  
15 Estimate upon request or scheduling an item or  
16 service. He stated that uninsured and self-pay  
17 patients must receive a Good Faith Estimate at least  
18 72 hours before services.

19 Mr. Buono also noted that a Good Faith Estimate  
20 must be given at least 3 hours ahead of time if a  
21 service is scheduled within three days. He noted the  
22 act does require that a Good Faith Estimate be  
23 provided to a patient's plan in advance of service but  
24 stated that the federal government and Pennsylvania is  
25 taking a non-enforcement approach to this provision

1 due to the technological challenges affecting this  
2 provision.

3 Mr. Buono stated that providers are encouraged to  
4 coordinate with co-providers to present a single Good  
5 Faith Estimate, but the Department of Health and Human  
6 Services (HHS) is exercising enforcement discretion  
7 and flexibility to allow for technical coordination.

8 Mr. Buono provided a summary of providers that  
9 may not balance bill. He stated that providers and  
10 facilities must have a business process to give  
11 provider directory and network information to plans  
12 anytime there is a material change. He commented that  
13 providers and facilities may, by contract, impose on  
14 plans the duty to keep the directory current in the  
15 event of contract termination. He noted that the  
16 provider or facility must reimburse the patient plus  
17 interest if a provider or facility bills a patient  
18 more than the in-network cost-sharing amount and the  
19 patient pays the bill.

20 Mr. Buono addressed continuity of care, where a  
21 contract with a plan terminates and the provider or  
22 facility is no longer in-network and the patient is a  
23 continuing care patient, the provider must accept  
24 payment, including cost-sharing calculated on an in-  
25 network basis for the duration of the continuity of

1 care.

2 Mr. Buono stated that providers with complaints  
3 about a plan should contact the Pennsylvania Insurance  
4 Department because they have a process to quickly  
5 review the complaint. He mentioned HHS is also  
6 establishing a complaint process with the  
7 acknowledgement of the complaint possibly taking 60  
8 days. He mentioned that providers with complaints  
9 about a patient should first make sure the patient  
10 understands the act and are encouraged to contact the  
11 Pennsylvania Insurance Department.

12 Mr. Buono noted that patients who do understand  
13 the act should be handled as before with the  
14 understanding in the case of a surprise medical bill  
15 that the provider may not collect more than the in-  
16 network cost-sharing.

17 Sandy Ykema, Esquire, J.D., Senior Health  
18 Insurance Counsel, Pennsylvania Insurance Department,  
19 addressed disclosure requirements, noting a one-page  
20 disclosure notice must be available to patients with  
21 the requirements and prohibitions regarding balance  
22 billing and must identify how a patient may contact  
23 the appropriate state and federal agencies if the  
24 patient believes the provider or facility has violated  
25 the requirements described in the notice.

1 Ms. Ykema stated that the information has to be  
2 publicly available from the provider and facility as  
3 well as being posted. She mentioned the Pennsylvania  
4 Insurance Department has a model notice and  
5 information on their website, along with the federal  
6 government website containing NSA information.

7 Ms. Ykema addressed notice and consent, which  
8 allows a provider to balance bill if they give notice  
9 and receive written consent from the patient at least  
10 3 days before the service, not later than 1 business  
11 day after scheduling, or 3 business days in advance if  
12 the service is scheduled 10 days in advance. She  
13 noted it may not be used in an emergency situation.  
14 She explained that the notice has to be on a separate  
15 form, signed, retained for seven years, and a copy  
16 given to the patient.

17 She commented that the notice and consent has to  
18 give notice that the provider does not participate in  
19 the consumer's health insurance plan, have a Good  
20 Faith Estimate amount that the provider may charge for  
21 all of the services, explain that there may need to be  
22 prior authorization or other approval, and be clear  
23 that a person does not have to consent to an out-of-  
24 network provider.

25 Ms. Ykema emphasized that a person has to be able



1 to get services from an available in-network provider,  
2 but if there is no available in-network provider, then  
3 notice and consent may not be used to allow the  
4 provider to balance bill.

5 Ms. Ykema addressed payment, where the provider  
6 will need to confirm the patient's coverage. She  
7 explained that an out-of-network provider who  
8 furnished a surprise medical service may collect cost-  
9 sharing from the patient and then the provider may  
10 bill the patient directly for all remaining charges.

11 Ms. Ykema noted a provider and plan may negotiate  
12 if the provider is not satisfied with the amount  
13 directly and then through a federally administered  
14 Independent Dispute Resolution process. She mentioned  
15 there is litigation on the qualifying payment amount  
16 and the Independent Dispute Resolution process at the  
17 federal level.

18 Ms. Ykema addressed disputes with uninsured  
19 patients, where the provider may bill the patient.  
20 She stated that the patient may access the Patient-  
21 Provider Dispute Resolution process if there is a  
22 difference in the Good Faith Estimate more than \$400.  
23 She noted that the patient will pay a small  
24 administrative fee to start the process within 120  
25 days and will recoup that if the patient prevails.

1 Ms. Ykema addressed enforcement, noting that  
2 anyone with concerns regarding the No Surprises Act  
3 should contact the Pennsylvania Insurance Department,  
4 which is a Commonwealth of Pennsylvania agency  
5 coordinating enforcement with all of the state  
6 agencies, including the Department of State,  
7 Department of Health, and Department of Drug and  
8 Alcohol. She mentioned that the Pennsylvania  
9 Insurance Department has a process to review the  
10 complaint and expeditiously handle it, where the  
11 response time may be delayed using the federal  
12 process.

13 Ms. Ykema noted that the state law applies unless  
14 it prevents the application of the federal law. She  
15 mentioned that professional conduct and licensure are  
16 the Department of State primary tools and insurance  
17 laws are the Pennsylvania Insurance Department laws.  
18 She explained that state agencies that receive a call  
19 related to balance billing and the No Surprises Act  
20 can go to the Pennsylvania Insurance Department's  
21 website for guidance.

22 Ms. Ykema stated that complaints are assigned to  
23 a consumer services representative to work with the  
24 patient, provider, or health plan and with other state  
25 agencies and collaborate with the federal agency if

1 they cannot address the issue completely.

2 Ms. Ykema noted the Department of Health and  
3 Human Services oversees the insurance plans,  
4 providers, and facilities; Department of Labor  
5 oversees self-funded plans; and the Office of  
6 Personnel Management oversees the Federal Employees  
7 Health Benefits (FEHB) program.

8 Ms. Ykema encouraged everyone to visit the  
9 Pennsylvania Insurance Department at  
10 [www.insurance.pa.gov/nosurprises](http://www.insurance.pa.gov/nosurprises) for more information.

11 Vice Chair Roussel thanked the Pennsylvania  
12 Insurance Department for their presentation.]

13 \*\*\*

14 Report of Board Counsel -

15 [Juan A. Ruiz, Esquire, Board Counsel, noted the Board  
16 met in Executive Session prior to the meeting and  
17 conducted quasi-judicial deliberations on all of the  
18 matters currently listed on today's agenda.

19 Mr. Ruiz mentioned that the Board discussed one  
20 final adjudication and order and one proposed  
21 adjudication and order during Executive Session.

22 Mr. Ruiz also informed everyone that a Regulatory  
23 Work Session will be held after today's meeting to  
24 finish discussion concerning the pharmacy technician  
25 regulations.

1 Mr. Ruiz addressed immunization regulations,  
2 noting department review is finished and the  
3 regulations are going through other agencies at this  
4 point. He commented that it should go to the  
5 Independent Regulatory Review Commission (IRRC) no  
6 later than April 1 and, if approved, published, and  
7 then move to the Office of Attorney General for  
8 approval.

9 Chair Hart mentioned the issue, where students  
10 may not be able to continue to immunize and have to  
11 retake the 20-hour course and asked what would need to  
12 be done to let them continue.

13 Mr. Ruiz stated that the Board would be  
14 discussing the injectables training waiver request at  
15 the March meeting and would have a better idea at that  
16 time. He commented that the question is really  
17 dealing with the transfer from the intern to the  
18 pharmacist license of the authorization to administer  
19 injectables and having to do the training over but  
20 assumed they would not have to do that with the  
21 proposed regulation in place.]

22

\*\*\*

23 Report of Board Chairperson - No Report

24

\*\*\*

25 Report of Probable Cause Screening Committee

1 [Patrick M. Greene, Esquire, Office of Attorney  
2 General, noted signing one Petition for Physical and  
3 Mental Examination.]

4 \*\*\*  
5 Report of Commissioner - No Report

6 \*\*\*  
7 Miscellaneous

8 [Terry M. Talbott, R.Ph., provided a report on the  
9 Pennsylvania Pharmacists Association (PPA)  
10 presentation. She stated that PPA pivoted from in  
11 person to virtual do to the surge of Omicron. She  
12 noted presenting a speed round of regulation review on  
13 January 25 and that almost 90 people were in  
14 attendance, with good conversation back and forth.

15 Ms. Talbott mentioned giving a regulatory update  
16 and showing them the chart on the regulatory approval  
17 process. She also told them they need to contact  
18 their legislator to get the regulatory process  
19 revised.]

20 \*\*\*  
21 Report of Executive Secretary

22 [Melanie Zimmerman, R.Ph., Executive Secretary,  
23 informed the Board that the continuing education audit  
24 is still ongoing and mentioned that the major issue is  
25 with pharmacists not completing the specialized

1 continuing education (CE).

2 Ms. Talbott suggested moving the continuing  
3 education information link that is currently posted  
4 under "Announcements" on the Board's web site to the  
5 front page.

6 Ms. Zimmerman would look into if the information  
7 could be posted on the welcome page; she believes that  
8 a lot of people skip over the renewal instructions  
9 which reference the continuing education requirements.

10

11 Ms. Talbott requested PPA's and PSHP's assistance  
12 in helping educate licensees to confirm the right  
13 courses are being taken.]

14

\*\*\*

15 New Business - NABP Annual Meeting

16 [Melanie Zimmerman, R.Ph., Executive Secretary,  
17 referred to the 118th National Association of Boards  
18 of Pharmacy (NABP) Annual Meeting.]

19 MS. TALBOTT:

20 I would move that we send Janet Hart as  
21 our delegate and Christine Roussel as our  
22 alternate delegate to the NABP Annual  
23 Meeting.

24 I will include in that motion that  
25 one of them takes advantage of the travel

1 grant with all the bells and whistles  
2 that go with that as far as working  
3 within the commonwealth confines, and I  
4 would include in that that Christine be  
5 allowed to go early on the 17th of May so  
6 she could participate in the Resolutions  
7 Committee on the 18th.

8 MR. GREENE:

9 Second.

10 VICE CHAIR ROUSSEL:

11 Open for discussion? We can call for a  
12 vote. All in favor, say aye? Any  
13 opposed or abstentions?

14 [The motion carried unanimously.]

15 \*\*\*

16 [Melanie Zimmerman, R.Ph., Executive Secretary, noted  
17 the Board decided they did not have any proposed  
18 amendments to NABP's Constitution and Bylaws nor were  
19 they going to engage in the Educational Poster  
20 Session.]

21 \*\*\*

22 New Business - Multistate Pharmacy Jurisprudence  
23 Examination (MPJE) Test Question Writer

24 [Melanie Zimmerman, R.Ph., Executive Secretary, stated  
25 that the Board has to choose somebody to prepare

1 questions for the MPJE each year, and the Board itself  
2 is prohibited from doing that. She asked whether  
3 there were any motions in terms of assigning somebody  
4 to be the question writer for the Board.]

5 MS. TALBOTT:

6 I will make the motion that we assign  
7 Rich Smiga to be our test writer, and if  
8 he should happen to be unable to serve in  
9 that capacity, then I would recommend we  
10 reach out to Ed Bechtel in his place.

11 CHAIR HART:

12 I second.

13 VICE CHAIR ROUSSEL:

14 Any further discussions on the matter?  
15 Let's call the vote. All in favor? Any  
16 opposed or abstentions?

17 [The motion carried unanimously.]

18 \*\*\*

19 New Business - Proposed 2023 Board Meeting Dates

20 [Melanie Zimmerman, R.Ph., Executive Secretary,  
21 requested approval for the proposed 2023 meeting dates  
22 of January 31, March 21, May 2, June 27, August 22,  
23 September 26, November 7, and December 19.]

24 VICE CHAIR ROUSSEL:

25 Do we have a motion to approve those?



1 MS. TALBOTT:

2 I will make that motion to approve those  
3 meeting dates.

4 CHAIR HART:

5 I second.

6 VICE CHAIR ROUSSEL:

7 Let's call for a vote. All in favor?  
8 Any opposed or abstained?

9 [The motion carried unanimously.]

10 \*\*\*

11 For the Board's Information

12 [Melanie Zimmerman, R.Ph., Executive Secretary, stated  
13 that the Alliance for Pharmacy Compounding provided  
14 comments for the Board's consideration on the United  
15 States Pharmacopeia (USP), and the Board wanted to  
16 acknowledge that they received and reviewed those.

17 Ms. Zimmerman informed everyone of a price  
18 increase for the NABP Electronic Licensure Transfer  
19 Program effective June 1, 2022, from \$375 to \$400,  
20 along with a state fee from \$75 to \$100.

21 Ms. Zimmerman noted the NABP Well-Being Index for  
22 Pharmacy Personnel Reports and State Report for NABP  
23 District 2 for December 2021 and January 2022.

24 Ms. Zimmerman noted NABP also provided a policy  
25 statement on workplace safety and well-being.

1 Ms. Zimmerman asked the Board whether there was a  
2 motion to develop an Article Review Committee to  
3 consider this type of information.]

4 MS. TALBOTT:

5 I'll make the motion that we create this  
6 Article Review Committee and the members  
7 be Dr. Roussel, Mr. Greene, and myself.

8 VICE CHAIR ROUSSEL:

9 Would anybody like to second that motion?

10 MR. GREENE:

11 Second.

12 VICE CHAIR ROUSSEL:

13 Any further discussion on the topic of  
14 convening an Article Review Committee?  
15 All in favor? Any opposed or abstaining?

16 [The motion carried unanimously.]

17 \*\*\*

18 MOTIONS

19 MR. GREENE:

20 At agenda item 2, I make a motion that we  
21 approve the Consent Agreement at Case No.  
22 18-54-010788.

23 MS. TALBOTT:

24 Second.

25 VICE CHAIR ROUSSEL:

1 Any discussion? Call for a vote.  
2 Roussel, aye; Hart, aye; Talbott, aye;  
3 Claggett, aye; Greene, aye.

4 [The motion carried unanimously. The Respondent's  
5 name on agenda item 2 is Sarwinder K. Malhi, R.Ph.]

6 \*\*\*

7 MR. GREENE:

8 At agenda item 3, I make a motion that we  
9 approve the Consent Agreement at Case  
10 Nos. 18-54-012531, 18-54-012534, 20-54-  
11 004984 & 21-54-011561.

12 MS. TALBOTT:

13 Second.

14 VICE CHAIR ROUSSEL:

15 Any discussion? Call for a vote.  
16 Roussel, aye; Hart, aye; Talbott, aye;  
17 Claggett, aye; Greene, aye.

18 [The motion carried unanimously. The Respondent's  
19 name on agenda item 3 is Auro Pharmacies, Inc. t/d/b/a  
20 Central Drugs.]

21 \*\*\*

22 MR. GREENE:

23 At agenda item 4, I make a motion that we  
24 approve the Consent Agreement at Case No.  
25 19-54-012928.

1 MS. TALBOTT:

2 Second.

3 VICE CHAIR ROUSSEL:

4 Any discussion? Call for a vote.

5 Roussel, aye; Hart, aye; Talbott, aye;

6 Claggett, aye; Greene, aye.

7 [The motion carried unanimously. The Respondent's  
8 name on agenda item 4 is Robert Derval Kapp, R.Ph.]

9 \*\*\*

10 MR. GREENE:

11 At agenda item 5, I make a motion that we  
12 approve the Consent Agreement at Case No.  
13 21-54-010951.

14 MS. TALBOTT:

15 Second.

16 VICE CHAIR ROUSSEL:

17 Any discussion? I call for a vote.

18 Roussel, aye; Hart, aye; Talbott, aye;

19 Claggett, aye; Greene, aye.

20 [The motion carried unanimously. The Respondent's  
21 name on agenda item 5 is Tabula Rasa HealthCare Group,  
22 Inc. t/d/b/a MedWiseRx.]

23 \*\*\*

24 MR. GREENE:

25 At agenda item 6, in the matter of BPOA

1                   v. Scott Tingler, R.Ph., Case No. 20-54-  
2                   005568, I make a motion that we approve  
3                   the Final Adjudication and Order.

4 MS. TALBOTT:

5                   Second.

6 VICE CHAIR ROUSSEL:

7                   Any discussion? Call for a vote.

8                   Roussel, aye; Hart, aye; Talbott, aye;

9                   Claggett, aye; Greene, aye.

10 [The motion carried unanimously.]

11   \*\*\*

12 MR. GREENE:

13                   At agenda item 7, in the matter of the  
14                   Petition for Reinstatement of Anthony  
15                   Bruno, R.Ph., Case No. 21-54-011900, I  
16                   make a motion that we approve and adopt  
17                   the hearing examiner's Proposed  
18                   Adjudication and Order.

19 MS. TALBOTT:

20                   Second.

21 VICE CHAIR ROUSSEL:

22                   Any discussion? Call for a vote.

23                   Roussel, aye; Hart, aye; Talbott, aye;

24                   Claggett, aye; Greene, aye.

25 [The motion carried unanimously.]

1 \*\*\*

2 Applications

3 MR. GREENE:

4 At agenda item 9, I make a motion that we  
5 approve the Application of Yuliya  
6 Byshenko for a Reduction in the Number of  
7 Intern Hours Required of a Graduate of a  
8 Foreign Pharmacy School from 1,500 hours  
9 to 1,000 hours.

10 MS. TALBOTT:

11 Second.

12 VICE CHAIR ROUSSEL:

13 Any discussion? Call for a vote.

14 Roussel, aye; Hart, aye; Talbott, aye;

15 Claggett, aye; Greene, aye.

16 [The motion carried unanimously.]

17 \*\*\*

18 Adjournment

19 VICE CHAIR ROUSSEL:

20 Would anybody like to make a motion to  
21 adjourn the meeting and then we will have  
22 the Regulatory Work Session afterwards?

23 MS. TALBOTT:

24 I will make the motion that we adjourn  
25 and move to the Regulatory Work Session.

1 VICE CHAIR ROUSSEL:

2                   Second?

3 MR. GREENE:

4                   Second.

5 VICE CHAIR ROUSSEL:

6                   All in favor of adjourning, say aye. The  
7                   meeting is adjourned.

8 [The motion carried unanimously.]

9   \*\*\*

10 [There being no further business, the State Board of  
11 Pharmacy Meeting adjourned at 11:47 a.m.]

12   \*\*\*

13 [A State Board of Pharmacy Regulatory Work Session was  
14 held immediately following the regular Board meeting.]

15   \*\*\*

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CERTIFICATE

I hereby certify that the foregoing summary minutes of the State Board of Pharmacy meeting, was reduced to writing by me or under my supervision, and that the minutes accurately summarize the substance of the State Board of Pharmacy meeting.



Samantha Sabatini,

Minute Clerk

Sargent's Court Reporting  
Service, Inc.



STATE BOARD OF PHARMACY  
REFERENCE INDEX

February 8, 2022

	TIME	AGENDA
1		
2		
3		
4		
5		
6		
7		
8	9:00	Executive Session
9		
10	10:30	Return to Open Session
11		
12	10:34	Official Call to Order
13		
14	10:35	Introduction of Board Members
15		
16	10:35	Introduction of Attendees
17		
18	10:38	Approval of Agenda
19		
20	10:38	Approval of Minutes
21		
22	10:40	Appointment - Carolyn A. DeLaurentis,
23		Esquire, Deputy Chief Counsel,
24		Prosecution Division Annual Report
25		
26		
27	10:54	Report of Prosecutorial Division
28		
29	11:00	Appointment - Pennsylvania Insurance
30		Department Presentation - No
31		Surprises Act
32		
33	11:24	Report of Board Counsel
34		
35	11:30	Report of Probable Cause Screening
36		Committee
37		
38	11:30	Miscellaneous
39		
40	11:33	Report of Executive Secretary
41		
42	11:35	New Business
43		
44	11:39	For the Board's Information
45		
46	11:42	Motions
47		
48	11:46	Applications
49		
50	11:47	Adjournment