

**Maryland Board of Pharmacy  
Public Board Meeting**

**Meeting Minutes  
January 20, 2021**

<b>Name</b>	<b>Title</b>	<b>Present</b>	<b>Absent</b>
Bouyoukcas, S.	Commissioner	X	
Evans, K.	Commissioner	X	
Fink, K.	Commissioner	X	
Glascoc Geigher, P.	Commissioner	X	
Hardesty, J.	Commissioner/Treasurer	X	
Leikach, N.	Commissioner	X	
Morgan, K.	Commissioner/President	X	
Oliver, B.	Commissioner	X	
Rusinko, K.	Commissioner/Secretary	X	
Singal, S.	Commissioner	X	
Yankellow, E.	Commissioner	X	
Bethman, L.	Board Counsel	X	
Felter, B.	Staff Attorney	X	
Speights-Napata, D.	Executive Director	X	
Fields, E.	Deputy Director of Operations	X	
James, D.	Licensing Manager	X	
Leak, T.	Compliance Director	X	
Chew, C.	Enforcement Compliance Auditor	X	

Subject	Responsible Party	Discussion	Action Due Date (Assigned to)	Results
<b>I. Executive Committee Report(s)</b>	<b>A.) K. Morgan, Board President</b>  <b>B.) K. Rusinko, Secretary</b>	<p><i>Members of the Board with a conflict of interest relating to any item on the agenda are advised to notify the Board at this time or when the issue is addressed in the agenda.</i></p> <ol style="list-style-type: none"> <li>1. Call to Order 9:30 a.m.</li> <li>2. Sign-in Introduction and of meeting attendees – <i>(Please indicate on sign-in sheet if you are requesting CE Units for attendance)</i></li> <li>3. Distribution of Agenda and packet materials</li> <li>4. Review and approve December 2020 Public Meeting Minutes</li> </ol>	<p>President Morgan opened the meeting excited to see vaccinations being administered to Maryland citizens, and many pharmacists have done a great job stepping up in legendary ways to make this successful. Information on the expansion of vaccine allocation will continue- allowing more pharmacists and technicians to protect Maryland so we can return to public meetings with a sense of normalcy.</p> <p>4. Motion by S. Bouyoukas approval of December 2020 Public Meeting minutes; 2<sup>nd</sup> K. Rusinko.</p>	<p>The Board voted to approve this motion.</p>

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<b>II. A. Executive Director Report</b>	<b>D. Speights-Napata, Executive Director</b>	<p><b>1. Staffing Update</b></p> <p><b>2. Upcoming Meeting</b></p>	<p>1. The Board welcomed Earnest Ford to the investigator team. Lakeisha Griggs will join the investigator team on January 27. The state has approved the request from the Board to fill the Legislative Liaison position and it will be posted soon.</p> <p>2. There were a several meetings canceled due to the holiday season. Ms. Speights-Napata was able to attend MSHP winter meeting on January 13. The highlight of the meeting was results of the Diversity, Equity and Inclusion survey that was distributed to 62 members. MSHP will implement the suggestions received that included:</p> <ul style="list-style-type: none"> <li>▪ Expand training and clinical services for the medically underserved.</li> <li>▪ Expand the scope of practice and partnering with other organizations in these efforts.</li> <li>▪ Approve funding for incentives to create programs targeting the underserved.</li> <li>▪ Develop toolkits.</li> <li>▪ Create a lobbying campaign.</li> </ul>	

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		<p style="text-align: center;"><b>3. COVID vaccine update</b></p>	<ul style="list-style-type: none"> <li>▪ Continue highlighting disparities and best practices.</li> <li>▪ Research examples of successful legislative initiatives in other states that focus on minority patients and create a bias training.</li> </ul> <p>It was also mentioned the Maryland Pharmacy legislative day in Annapolis will be held February 2 between 7:30am-2:00pm.</p> <p><b>Maryland Department of Health (MDH) Update regarding COVID-19 vaccination prioritization and allocation.</b> MDH is working as quickly and carefully as possible to distribute our federal allocation of COVID-19 vaccines across the state. At this time, Maryland continues to address Phase 1A of its vaccine distribution plan, focusing on distributing vaccines to health care workers, nursing homes, and first responders. All health care workers licensed, registered, or certified by a state health occupation board or MDH are currently eligible to get vaccinated. Please visit the Board's website for additional</p>	

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		<p>4. <b>Legislative Update</b></p> <ul style="list-style-type: none"> <li>▪ <b>HB14-Pharmacists Prescription Drug and Device Labels – Expiration Dates-Focusing on altering the expiration date on labels on drugs and devices dispensed in the manufacturers original packaging by a pharmacist expiration date set by the manufacturer or a shorter period determined by the pharmacist.</b></li> </ul> <p><b>Recommendation:</b> Board Committee is recommending taking no position on this but we are planning on sending a letter of information with it because we have concerns about the labeling aspect of this bill and also we have highlighted the USP standard that applies to the label; which says The label of an official drug product or nutritional or dietary supplement product shall bear an expiration date. All products shall display the expiration so it can be read by an ordinary individual under customary conditions of purchasing use. The expiration date shall be prominently displayed in high contrast to the background or it shall be darkly involved and easily understood. Also, the term manufactured original packaging can mean a lot of things it can be a stock bottle or tablet unit dose tablet a liquid inhaler or eye drops. Pharmacies are required to maintain specific environmental conditions which is not the case with the</p>	<p>information regarding this update  <a href="https://health.maryland.gov/pharmacy">https://health.maryland.gov/pharmacy</a>            Recommendation from Committee; 2<sup>nd</sup> by S. Bouyoukias.</p>	

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		<p>consumer. The Board also have concerns about multiyear expiration dates for many of these items versus a one-year maximum date as currently required. And for this reason we would like to submit a letter of education and take no position</p> <ul style="list-style-type: none"> <li>▪ <b>HB 135/84-Pharmacists - Administration of Self-Administered Medications and Maintenance Injectable Medications-</b></li> </ul> <p><b>Recommendation:</b> Board Committee recommending to support this bill.</p>	<p>Recommendation from committee; 2nd by S. Bouyoukas.</p> <p>Linda Bethman, Board Counsel, stated the Board supports the bill with an amendment to the bill. This bill allows pharmacist to expand the scope to include maintenance injectable, but pursuant to regulations that are promulgated jointly with the Board of Physicians and the Board of Nursing. The requirements to jointly promulgate regulations for all three boards to sign off and approve the regulation. The suggested amendment is to change the wording to the Board of Pharmacy will promulgate regulations in consultation with the other two Boards.</p>	
		<ul style="list-style-type: none"> <li>▪ <b>HB170 Cancer Drugs – Physician Dispensing and Coverage-</b>Providing that certain provisions of law do not prohibit a physician who has a valid dispensing permit</li> </ul>	<p>Recommendation from committee; 2<sup>nd</sup> by S. Bouyoukas.</p>	

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		<p>and complies with certain provisions of law from personally dispensing to a patient by mail order a starter dosage or a cancer drug or device or an initial or refill prescription of a cancer drug. Committee is representing opposition to this bill we have drafted testimony and are scheduled to testify against this bill today at 1:30pm. Part of the opposition includes the following; This still allow physicians to dispense cancer drugs including refills through the mail this will would effectively deprive a vulnerable patient population of the drug utilization review and monitoring services of specialty pharmacist and current medication delivery model. Just as oncologist are specifically trained and experienced in diagnosing and treating cancer; specialty pharmacist is trained in experienced in the appropriating selection, dosing monitoring and safe utilization of high risk cancer medication. This bill relegates the vital component of cancer drug therapy from specialty pharmacist who are the drug experts to oncologist who do not have the experience resources or time to effectively monitor a patient medication therapy in addition to demanding practice. Ultimately this bill may cause increase risk to an already vulnerable patient population that due to their compromised medical condition make identification of medication errors or adverse reactions more difficult to identify. There is also a section on safety and insurance- both of which we feel pharmacist are trained to handle more efficiently in this particular instance.</p>		

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		<p><b>Recommendation:</b> Board Committee are recommending opposition to this bill.</p> <ul style="list-style-type: none"> <li>▪ <b>SB298-Boad of Pharmacy Closure Notice- Notice to Customers</b> <b>Recommendation:</b> Requiring the notice of closing to be posted inside of pharmacy for 30 days before closing and on the pharmacy website or Maryland notice to customer that have a refill 14 days before closing. The Board recommends taking no position on this but we going to submit a letter of concern, our concern is this bill may cause excessive administrative burden not only on the pharmacies but also the pharmacy staff at the Board.</li> <li>▪ <b>HB107-Prohibition on vending machines sales of drugs and medicines repeal.</b> <b>Recommendation:</b> The department has not taken a position on this bill yet; we are recommending no position; we will defer to the position MDH file.</li> <li>▪ <b>HB28-Public Health- Implicit Bias Training and the Office of Minority Health and Health Disparities- Requiring the Office of Minority Health and Health Disparities to publish, to a certain extent, health data that includes race and ethnicity information collected by the Office and to provide updates at least every 6 months.</b> <b>Recommendation:</b> Board Committee is recommending no position on this bill.</li> </ul>	<p>Recommendation from committee; 2<sup>nd</sup> by S. Bouyoukas.</p> <p>Recommendation from committee; 2<sup>nd</sup> by S. Bouyoukas.</p> <p>Recommendation from committee; 2<sup>nd</sup> by S. Bouyoukas.</p>	

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		<ul style="list-style-type: none"> <li>• <b>SB106- License in Good Standing with the State Department of Assessments and Taxation.</b> Requiring, prior to permit licenses or renewal the issuing authority to verify the applicant is in good standing with the State Department of Assessments and Taxation. <b>Recommendation:</b> Board Committee is recommending no position on this bill. The reasoning is because the tax status for licensees is already a requirement of the Board has, therefore the Committee recommends no position.</li> </ul>	<p>Recommendation from committee; 2<sup>nd</sup> by S. Bouyoukas.</p> <p>After a brief discussion motion to amend the no position and send a letter of information.</p>	
<b>B. New Business</b>	<b>K. Morgan, Board President</b>	<b>NONE</b>		
<b>C. Operations Report</b>	<b>E. Fields, Deputy Director/ Operations</b>	<ol style="list-style-type: none"> <li>1. Procurement and Budget Updates <ol style="list-style-type: none"> <li>a. December 2020 Financial Statements</li> </ol> </li> <li>2. Management Information Systems (MIS) Unit Updates</li> </ol>	<p>1a. A report on board revenue for December was provided.</p> <p>2a. MIS received a request from CRISP, PDMP and Medicaid to obtain the Board's data of pharmacist within their jurisdiction to issue a blast email to pharmacist regarding the availability of the COVID vaccination.</p>	

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<b>D. Licensing</b>	<b>S. Bouyoukas, Commissioner</b>	<p><b>1. Unit Updates</b></p> <p><b>2. Monthly Statistics</b></p>																																																				
<b>D. Compliance</b>	<b>T. Leak, Compliance Director</b>	<p><b>1. Unit Updates</b></p> <p><b>2. Monthly Statistics</b></p> <p><b>Complaints &amp; Investigations:</b></p>																																																				
		<table border="1"> <thead> <tr> <th>License Type</th> <th>New</th> <th>Renewed</th> <th>Reinstated</th> <th>Total</th> </tr> </thead> <tbody> <tr> <td>Distributor</td> <td>12</td> <td>1</td> <td>0</td> <td>1,447</td> </tr> <tr> <td>Pharmacy</td> <td>18</td> <td>1</td> <td>0</td> <td>2,124</td> </tr> <tr> <td>Pharmacist</td> <td>53</td> <td>477</td> <td>0</td> <td>13,079</td> </tr> <tr> <td>Vaccination</td> <td>99</td> <td>154</td> <td>0</td> <td>5,214</td> </tr> <tr> <td>Pharmacy Intern - Graduate</td> <td>0</td> <td>0</td> <td>0</td> <td>58</td> </tr> <tr> <td>Pharmacy Intern - Students</td> <td>10</td> <td>3</td> <td>0</td> <td>779</td> </tr> <tr> <td>Pharmacy Technician</td> <td>83</td> <td>256</td> <td>2</td> <td>10,927</td> </tr> <tr> <td>Pharmacy Technician Student</td> <td>3</td> <td>0</td> <td>0</td> <td>59</td> </tr> <tr> <td><b>TOTAL</b></td> <td><b>278</b></td> <td><b>892</b></td> <td><b>1</b></td> <td><b>33,687</b></td> </tr> </tbody> </table>	License Type	New	Renewed	Reinstated	Total	Distributor	12	1	0	1,447	Pharmacy	18	1	0	2,124	Pharmacist	53	477	0	13,079	Vaccination	99	154	0	5,214	Pharmacy Intern - Graduate	0	0	0	58	Pharmacy Intern - Students	10	3	0	779	Pharmacy Technician	83	256	2	10,927	Pharmacy Technician Student	3	0	0	59	<b>TOTAL</b>	<b>278</b>	<b>892</b>	<b>1</b>	<b>33,687</b>		
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		<p>New Complaints -30</p> <ul style="list-style-type: none"> <li>• Customer Service -0</li> <li>• Refusal to Fill -4</li> <li>• Employee Pilferage -2</li> <li>• Disciplinary Action in Another State - 4</li> <li>• Unlicensed Personnel - 1</li> <li>• Unprofessional Conduct -3</li> <li>• Inspection Issues -3</li> <li>• Dispensing Error -1</li> <li>• Medication Error -3</li> <li>• Invalid/Expired CPR -0</li> <li>• Failure to Report Adverse Event in Compounding -3</li> <li>• Inspection Issues -6</li> <li>• Fraud -2</li> <li>• Arrested for Possession of Firearm -1</li> <li>• Resolved (including Carryover) -28</li> <li>• Actions within Goal - 23/28</li> <li>• Final disciplinary actions taken -3</li> <li>• Summary Actions Taken -1</li> <li>• Average days to complete -63</li> </ul> <p><b>Inspections:</b></p> <p>Total - 167</p> <p>Annual Inspections - 142 annual and 17 Narcotic Audit (follow-up) inspections</p> <p>Opening Inspections -6</p> <p>Closing Inspections - 2</p> <p>Relocation/Change of Ownership Inspections - 0</p> <p>Board Special Investigation Inspections - 0</p>		

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<p><b>E. Legislation &amp; Regulations</b></p>	<p><b>D. Speights-Napata</b></p>	<p><u>Legislation</u> The legislative session has started. There has been virtual hearings and some in person meeting with COVID restrictions.</p>		
<p><b>III. Committee Reports</b> <b>A. Practice Committee</b></p>	<p><b>K. Evans, Commissioner</b></p>	<p><b>Jeanne Saylor-Pharmacy Inc.:</b> Pharmacy Incorporated recently obtained a pharmacy permit in Maryland. Your law is very specific stating a pharmacy cannot provide prescription forms that have the pharmacy name, address, or other identifiers. Pharmacy Incorporated provides only nebulizer medication and almost all of our patients are Medicare part B recipients. Often the prescriptions we receive from prescribers do not include all the necessary requirements to bill Medicare part B, so we generate a prescription form in response to these prescriptions and fax it back to the doctor to review, sign and fax back to us so we can bill Medicare. If a patient refills regularly we will send this form to the doctor the month before the prescription expires so there is no interruption in therapy for the patient. This form has the name address phone and fax of the pharmacy so they know where to send this when it is signed or who to call if there is a question. Is it okay for us to do this in Maryland since it is in response to the prescription the provider has sent to us?</p> <p><b>Proposed Response:</b> Under Maryland Board of Pharmacy statute Md. Code Ann., Health Occ. § 12-313(b)(11), pharmacies may not provide prescription forms that provide the name or address of a pharmacist or pharmacy. Therefore, all identifying information</p>	<p>Recommendation by committee to approve draft response; 2<sup>nd</sup> by K. Morgan.</p>	<p>The Board voted to approve this motion.</p>

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		<p>about the pharmacy would need to be removed from the form in order to ensure compliance with the statute.</p> <p><b>Leila Sasanpour</b>-Midtown Pharmacy: We are trying to be able to sell Covid-19 home kit tests in our pharmacy but we want to be sure that we are authorized to do that because we got different responses. So now the main question is that:</p> <p>Are we able to do point of care testing for Covid-19 specifically using the BD Veritor system for Rapid Detection of SARS-CoV-2 when we have a CLIA Waiver from CMS and the State of Maryland? The reason we want this clarification is based on the email from Maryland Dept. of Health Office of Health Care Quality who said</p> <p>“Maryland is requiring that the Covid-19 EUA point of care tests be performed in a non-waived laboratory setting. While it states it is authorized to be distributed and used in settings outside a clinical lab environment, this is not binding for Maryland. Due to the infectious nature of the virus and the risks to safety in manipulating the test swab for these instruments, in Maryland we are requiring these testing sites hold non-waived CLIA Compliance or Accreditation certification (at least BSL-2) are performed in a Biosafety cabinet.</p> <p>The performance of these points of care tests have not been appropriately evaluated or reviewed by FDA, and using these tests in a CLIA waived setting, by inexperienced CLIA waived personnel, may put staff, patients, and their contacts in danger due to the infectious nature of this pathogen. Providers and laboratories are responsible for ensuring that any</p>		

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		<p>testing performed is done so in compliance with all applicable state policies during this emergency.”</p> <p><b>Proposed Response:</b> Governance of test kits is not under the purview of the Maryland Board of Pharmacy. For further information on this matter, please contact the Maryland Office of Health Care Quality. (OHCQ)</p> <p><b>Kwabena Nimarko-Central Pharmacy:</b> I have two questions concerning the collaborative practice agreement.</p> <ol style="list-style-type: none"> <li>1. Does a patient consent form need to be signed by the physician, pharmacist, and patient? Can it only be signed by the patient?</li> <li>2. Can a CPA be established between a nurse practitioner and physician and without the involvement of a physician?</li> </ol> <p><b>Proposed Response:</b></p> <ol style="list-style-type: none"> <li>1. Pursuant to COMAR 10.34.29.06, a collaborative practice agreement must include a contract, signed by the prescriber, the pharmacist, and the patient.</li> <li>2. COMAR 10.34.29.01B(2-1) defines an “authorized prescriber” as “a licensed physician, licensed podiatrist, or <i>certified advanced practice nurse with prescriptive authority.</i>” Assuming that your question is whether a collaborative practice agreement may be established between a pharmacist and a nurse practitioner without the involvement of a physician, the answer is yes, this is permissible.</li> </ol>	<p>Recommendation by committee to approve draft response; 2<sup>nd</sup> by K. Morgan.</p> <p>Recommendation by committee to approve draft response; 2<sup>nd</sup> by K. Morgan.</p>	<p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p>

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B. Licensing Committee	K. Rusinko, Commissioner	<p><b>I. Review of Pharmacist Applications:</b></p> <p>a. <u>#124662</u> - Applicant is requesting an extension of her Board's application. Due to COVID 19 closures she has been unable to sit for the exams. Per verification with Pearson Vue, both exams have been scheduled prior to the expiration of her Board application.  <u>Committee recommendation: If you do not pass the exams, you are welcome to reapply which will give you additional time to retest.</u></p> <p>b. <u>#123213</u> - Reciprocity applicant is requesting an extension to take the MPJE. Approval for the exam expired 04/24/2020.  <u>Committee recommendation: Extend ATT for 6 months, applicant will need to reapply.</u></p> <p>c. <u>#127448</u> - Applicant is requesting that her NAPLEX score be accepted outside of the Score Transfer window. She took the exam 09/2020.  <u>Committee recommendation: Will accept NAPLEX score. Will need to notify applicant and NABP.</u></p> <p>d. <u>AW</u> - Applicant is requesting a waiver of the 520 hours' experience hours.  <u>Committee recommendation: No exemption to the 520 hours' requirement. Applicant may apply via examination to Maryland.</u></p>	<p>1a. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p> <p>1b. Recommendation by Committee to approve 6-month extension, must reapply; 2<sup>nd</sup> by K. Morgan.</p> <p>1c. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p> <p>1d. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p>	<p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p>

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		<p>e. # 124776 - Applicant is requesting approval to take the NAPLEX for a 7th attempt. <u>Committee recommendation: Approve</u></p> <p>f. # 121725 - Applicant is requesting an extension of MPJE score. In September 2020, the Board approved an extension of her score until 12/31/2020. In April 2020, her application was extended. She is also requesting an extension of her NAPLEX eligibility date, which was previously extended in April 2020 until February 2021. <u>Committee recommendation: Approve both requests for 6 months. Will need to reapply if application expires.</u></p> <p>2. Review of Pharmacy Intern Applications:</p> <p>a. DD - Registrant is requesting additional time for her Intern registration as she had to repeat two years of pharmacy school. She is requesting an extension until 05/23/2021. <u>Committee recommendation: Approve extension until 05/31/2021.</u></p> <p>3. Review of Pharmacy Technician Applications:</p> <p>a. #127790 (127790 A1, 127790 A2, 127790 A3, 127790 A4, 127790 A5, 127790 A6) - The applicant is requesting approval of her application</p>	<p>1e. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p> <p>1f. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p>	<p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p>

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		<p>as she has worked in the pharmacy for 15 years. The Board received an Initial Technician Application on 12/04/2020. A status email was sent to the applicant on 12/07/2020 requesting the following information: Date of Completion from Board-approved Training Program. The applicant provided a notarized Pharmacy Technician Work Experience Affidavit. According to the affidavit, she has worked in the pharmacy since November 06, 2006 in the role of a pharmacy technician. Applicant explains: She has been employed as an unlicensed pharmacy technician for 15 years. In the past, she has practiced duties as a technician until the pharmacy was inspected. At this time, she only does deliveries for the pharmacy. However, she was informed by her employer and the MDBOP that she could be Grandfathered in and would only need to submit a Pharmacy Technician Work Experience Affidavit to meet the training requirements.</p> <p><b><u>Committee recommendation: Must complete a Board approved Technician training program and exam. Approve a refund.</u></b></p> <p><b>4. Review of Distributor Applications: NONE</b></p> <p><b>5. Review of Pharmacy Applications: NONE</b></p> <p><b>6. Review of Pharmacy Technicians Training Programs:</b></p>		

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		<p>a. <u>Craig's Drug Store</u> <u>Committee recommendation: Approve KEVIN MORGAN RECUSED</u></p> <p>b. <u>Health Mart</u> <u>Committee recommendation: Approve</u></p> <p>c. <u>Wise Technician Training Program (Wise Technician Training Program 1, Wise Technician Training Program 2)</u> <u>Committee recommendation: Approve</u></p> <p>7. New Business:</p> <p>a. <u>Jacob Creel - Mr. Creel is requesting an exception to the 6-month requirement for completion of the Technician training program. The trainee was hired 02/2020 and left the job in 07/2020, they were rehired 12/2020. The trainee has completed the program; however, it is outside of the 6-month requirement. Committee recommendation: Will accept the completion of the program, although outside of the 6-month period.</u> <b>KEVIN MORGAN RECUSED</b></p>	<p>6a. Recommendation by Committee; 2<sup>nd</sup> by S. Bouyoukas.</p> <p>6b. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p> <p>6c. Recommendation by Committee; 2<sup>nd</sup> by K. Morgan.</p> <p>7a. Recommendation by Committee; 2<sup>nd</sup> by N. Leikach.</p>	<p>The Board voted to approve this motion</p> <p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p> <p>The Board voted to approve this motion.</p>
C. Public Relations Committee	E. Yankellow, Commissioner	<p>Public Relations Committee Update:</p> <ul style="list-style-type: none"> <li>The Public Relations committee held their first virtual meeting on January 12. Deena</li> </ul>		

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		<p>Speights-Napata did a wonderful job introducing and opening the program. She provided detail and clarity on the role of pharmacist during COVID, she also provided clarification on the Governor's announcement of including pharmacist, dentist and other healthcare providers in the IB category. Don Taylor presented a wonderful 1-hour slideshow of the involving role of pharmacist during the pandemic. Attendees will receive a 1-hour CE after submitting the questionnaire. Commissioner Yankellow thanked those who helped with setting up the virtual meeting. There may be another meeting in the near future once feedback is obtained by those that were in attendance.</p>		
<b>D. Disciplinary</b>	<b>J. Hardesty Chair</b>	<p><b>Disciplinary Committee Update:</b></p> <ul style="list-style-type: none"> <li>• Committee met January 6.</li> <li>• A confidential discussion will be held in the Board's Closed Public Session.</li> </ul>		
<b>E. Emergency Preparedness Task Force</b>	<b>N. Leikach, Chair</b>	<p><b>Emergency Preparedness Task Force Update:</b></p> <ul style="list-style-type: none"> <li>• There is still a need for vaccinators. Please sign up with Maryland Responds. There is a couple step process to do so but volunteers are greatly needed.</li> </ul>		
<b>IV. Other Business &amp; FYI</b>	<b>K. Morgan, President</b>	<ul style="list-style-type: none"> <li>• Commissioner Bouyoukas made a comment regarding H.H.S allowing technicians to begin immunizing in the state of Maryland</li> </ul>		

Subject	Responsible Party	Discussion	Action Due Date (Assigned to)	Results
		<p>after proper training. This may be a good opportunity to consider allowing technicians in the future to begin immunizing as part of our regulations. President Morgan has held conversation regarding this opportunity for technicians and will continue discussions in the Executive Committee meetings.</p> <ul style="list-style-type: none"> <li>• Aliyah Horton-Executive Director MPhA mentioned HB135 is a priority bill for MPhA. This bill is 3 years in the making and when introduced it was much broader. Senator Lamb excluded and removed HIV from the bill last year and wanted to see the items listed in the bill first and would be open to amending the bill after demonstrated success. Ms. Horton would welcome the idea of the Board speaking to the Board of Physicians and the Board of Nursing in regards to HB135/84. February 21 MPhA will host their mid-year meeting. There will be a total of 6 CE's for attending. Please visit MPhA website for more information.</li> </ul>		
V. Adjournment	K. Morgan, President	<p>A. The Public Meeting was adjourned at 10:25 am.</p> <p>B. K. Morgan convened a Closed Public Session to conduct a medical review committee evaluation of confidential applications.</p> <p>C. The Closed Public Session was adjourned. Immediately thereafter, K. Morgan, convened</p>	<p>Motion to close the Public Board Meeting by S. Bouyoukas; 2<sup>nd</sup> by K. Evans.</p>	<p>The Board voted to approve this motion.</p>

Subject	Responsible Party	Discussion	Action Due Date (Assigned to)	Results
		<p><b>D. With the exception of cases requiring recusals, the Board members present at the Public Meeting continued to participate in the Closed Public Session and the Administrative Session</b></p>		

PRESIDING OFFICER'S WRITTEN STATEMENT FOR CLOSING A MEETING ("CLOSING STATEMENT")  
UNDER THE OPEN MEETINGS ACT (General Provisions Article § 3-305)

This form has two sides. Complete items 1 – 4:

1. Recorded vote to close the meeting: Date: 1/20/21; Time:     ; Location: Conference Call  
Motion to close meeting made by: S. Bougard Seconded by K. Evans  
Members in favor: unanimous; Opposed: None  
Abstaining:     ; Absent:     

2. Statutory authority to close session (check all provisions that apply):

This meeting will be closed under General Provisions Art. § 3-305(b) only:

(1)  "To discuss the appointment, employment, assignment, promotion, discipline, demotion, compensation, removal, resignation, or performance evaluation of appointees, employees, or officials over whom this public body has jurisdiction; any other personnel matter that affects one or more specific individuals"; (2)  "To protect the privacy or reputation of individuals concerning a matter not related to public business"; (3)  "To consider the acquisition of real property for a public purpose and matters directly related thereto"; (4)  "To consider a matter that concerns the proposal for a business or industrial organization to locate, expand, or remain in the State"; (5)  "To consider the investment of public funds"; (6)  "To consider the marketing of public securities"; (7)  "To consult with counsel to obtain legal advice"; (8)  "To consult with staff, consultants, or other individuals about pending or potential litigation"; (9)  "To conduct collective bargaining negotiations or consider matters that relate to the negotiations"; (10)  "To discuss public security, if the public body determines that public discussion would constitute a risk to the public or to public security, including: (i) the deployment of fire and police services and staff; and (ii) the development and implementation of emergency plans"; (11)  "To prepare, administer, or grade a scholastic, licensing, or qualifying examination"; (12)  "To conduct or discuss an investigative proceeding on actual or possible criminal conduct"; (13)  "To comply with a specific constitutional, statutory, or judicially imposed requirement that prevents public disclosures about a particular proceeding or matter"; (14)  "Before a contract is awarded or bids are opened, to discuss a matter directly related to a negotiating strategy or the contents of a bid or proposal, if public discussion or disclosure would adversely impact the ability of the public body to participate in the competitive bidding or proposal process."

Continued →

3. For each provision checked above, disclosure of the topic to be discussed and the public body's reason for discussing that topic in closed session.

Citation (insert # from above)	Topic	Reason for closed-session discussion of topic
§3-305(b) (3)	Applications for licensure	To engage in medical review committee deliberations regarding confidential matters contained in applications
§3-305(b) ( )		
§3-305(b) ( )		
§3-305(b) ( )		
§3-305(b) ( )		

4. This statement is made by Deena Speights-Napata for K. Morgan, Presiding Officer.

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**WORKSHEET FOR OPTIONAL USE IN CLOSED SESSION: INFORMATION THAT MUST BE DISCLOSED IN THE MINUTES OF THE NEXT OPEN MEETING**

Time of closed session: 10:25 Place: Conference Call  
 Purpose(s): To review confidential matters in licensure applications  
 Members who voted to meet in closed session: unanimous  
 Persons attending closed session: Anyone present in the open session  
 Authority under § 3-305 for the closed session: 3-305 (13)  
 Topics actually discussed: Applications for licensing  
 Actions taken: Process applications accordingly Each recorded vote: Affirmative Majority vote each application

For a meeting recessed to perform an administrative function (§ 3-104): Time: 10:55  
 Place: Conference Call Persons present: Persons in open Subject matter discussed: Complaint Investigations.