

**COMMONWEALTH OF MASSACHUSETTS  
BOARD OF REGISTRATION IN PHARMACY**

**MINUTES OF THE GENERAL SESSION  
239 Causeway Street, Fourth Floor ~ Room 417A  
Boston, Massachusetts, 02114**

**January 10, 2019**

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**Board Members Present**

Andrew Stein, Pharm D, RPh. President  
Kim Tanzer, PharmD, RPh. President Elect  
Julie Lanza, CPhT, Secretary  
Michael Godek, RPh  
Timothy Fensky, RPh  
Sebastian Hamilton, Pharm D, RPh  
Leah Giambarresi, Pharm D, RPh  
Stephanie Hernandez, Pharm D, BCGP, RPh  
Susan Cornacchio, JD, RN  
Carly Jean-Francois, RN, NP  
Dawn Perry, JD

**Board Members Not Present**

Patrick Gannon, RPh

**Board Staff Present**

David Sencabaugh, RPh, Executive Director  
Monica Botto, CPhT, Associate Executive Director  
Heather Engman, JD Board Counsel  
William Frisch, RPh Director of Pharmacy Compliance  
Michelle Chan, RPh Quality Assurance Pharmacist  
Joanne Trifone, RPh., Director of Pharmacy Investigations  
Kimberly Morton, CPhT, Compliance Officer  
Greg Melton, JD, PharmD, BCPS, RPh, Investigator  
Julienne Tran, Pharm D, RPh Investigator/Quality Assurance Pharmacist  
Joseph Santoro, RPh Investigator  
Christina Mogni, RPh investigator  
Ed Taglieri, MSM, NHA, RPh, PSUD Supervisor

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**TOPIC I.** Attendance by roll call:

**CALL TO ORDER 8:30 AM**

A quorum of the Board was present, established by roll call. President A. Stein chaired the meeting and asked if anyone was recording hearing, no one responded. He explained that the Board of Pharmacy was recording the meeting.

Roll call attendance: A. Stein, yes; K. Tanzer, yes; J. Lanza, yes; L. Giambarresi, yes;  
M. Godek, yes; S. Hernandez (yes); T. Fensky, yes; D. Perry, yes; C. Jean-Francois, yes; S. Hamilton, yes; S. Cornacchio, yes

C. Jean-Francois joined meeting 8:31 AM; D. Perry joined meeting 8:39 AM.

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**Topic II.**

**Approval of Agenda**

**TIME 8:32 AM**

**Agenda January 10, 2019**

**DISCUSSION:**

Change to Agenda:

1. Defer SA-INV-13964 Briova RX DS89743

**ACTION:**

Motion by M. Godek, seconded by L. Giambarresi and voted unanimously by those present to approve the agenda with noted change.

Dave introduced the intern Derek Borges MCPHS-Boston and Tenzin Kalsang Husson University. Andy asked all students in the audience to stand and introduce themselves.

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**Topic III**

**Approval of Board Minutes**

**TIME: 8:34 AM**

**Minutes**

**1. Draft, December 6, 2018 Session Minutes**

Changes:

1. Page 5; change vote: from: "Motion by L. Giambarresi, seconded by P. Gannon, and voted by the majority of those present to approve the application. T. Fensky and M. Godek opposed motion" to "Motion by L. Giambarresi, seconded by P. Gannon and voted unanimously by all those present to approve the application. M. Godek was recused."

**Action:**

Motion by S. Hamilton, seconded M. Godek, and voted unanimously to approve the regular session minutes of December 6, 2018 with noted changes.

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**TOPIC IV**

**REPORTS**

**Applications approved pursuant to Licensure Policy 13-01**

**Time: 8:34 AM**

**Discussion:** M. BOTTO noted that during the past month there have been thirty-two (32) changes of manager on record (MOR) and three (3) renovation expansion applications approved pursuant to Licensure Policy 13-01.

So noted

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**TOPIC IV**

**REPORTS**

**Monthly Report from Probation**

**Time: 8:34 AM**

**Discussion:** M. BOTTO provided the November 29, 2018 - December 31, 2018, Board of Pharmacy Statistics Report for the Probation monitor, which noted that eight (8) licensees satisfactorily completed probations, one (1) failed to cure, and there are currently thirty-eight (38) licensees on probation.

So noted

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**TOPIC IV**

**REPORTS**

**Monthly Report from BDCR pursuant to Policy 14-02**

**Time: 8:34 AM**

**Discussion:** M.BOTTO noted that there were ten (10) Board Delegated Review cases heard on January 7, 2019, all of the cases were CE deficiencies (SA-INV-14156, SA-INV-14153, SA-INV-14067, SA-INV-14226, SA-INV-14154, SA-INV-14228, SA-INV-14137, SA-INV-14138, SA-INV-14152, and SA-INV-14133) which were closed with no discipline warranted and remediation complete. The Board Delegated Review session was attended by A. STEIN as the Board Member, W. FRISCH Director of Pharmacy Compliance, H. ENGMAN as Board Counsel, and Executive Director D. SENCABAUGH.

So noted

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**TOPIC IV**

**REPORTS**

**Above Action Levels Approved by Staff Action 16-04**

**Time: 8:35 AM**

**Discussion:** K. MORTON noted that no above action level reports have been closed since last Board meeting pursuant to Licensure Policy 16-04.

So noted

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**TOPIC V**

**POLICIES and ADVISORIES**

**1. Revision of Bureau Staff Action Policy 17-03: Petitions for Retirement Status**

**Time: 8:36 AM**

**Presented by:** H. ENGMAN

**Discussion:** H. ENGMAN explained that the initial policy was approved on September 2017 and that the revision is to remove the minimum retirement age of 50 years old. This change is occurring across all the Boards in DPH.

**Action:** Motion by L. GIAMBARRESI, seconded by S. HAMILTON and voted unanimously by all those present to approve the updated policy with the noted change.

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**2. Joint Policy 2018-01: Permitted Prescription Changes and Additions**

**Time: 8:37 AM**

**Presented by:** M. CHAN

**Discussion:** M. CHAN explained that the changes to this policy are for clarification purposes. Section IV clarifies that changes to prescriptions may be documented either on the written prescription or in the pharmacy computer system. M. CHAN further explained that the language as listed in section III(A)(k) regarding "partial fill" was edited to "after consultation with the prescriber or authorized agent" rather than requiring contact with the prescriber as with most Schedule II changes. M. GODEK asked for further explanation about annotating the electronic prescription. M. CHAN responded that as long as it's documented and accessible, it would be acceptable. L. GIAMBARRESI asked for further clarification with section III(A)(k), and requested rewording of the language to not require consultation before filling, but notification of the prescriber/agent as soon as possible in order to avoid a delay in therapy. M. CHAN responded that the change would be made.

**Action:** Motion by T. FENSKY, seconded by L. GIAMBARRESI and voted unanimously by all those present to approve the updated policy with noted changes.

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**TOPIC VI** **APPLICATIONS** **Time: 8:43 AM**

**Circle Health Pharmacy: At Lowell General Hospital; New Community Pharmacy**

**Present: Michael Dusan (Director Pharmacy Lowell General); Chang Su (proposed MOR) and Eric Misio (Director of Plant Operations Lowell General Hospital)**

**Recused: None**

**Discussion:**

This is a new outpatient pharmacy at Lowell General Hospital; separate from the current inpatient pharmacy.

- In a separate area of the hospital, will use space currently held by gift shop. Gift Shop will remain as the “front Store” and pharmacy will be built in the back of this area. A temporary barrier will be built to separate the gift shop and pharmacy until it is licensed to open, then the barrier will be removed.
- Expand services to provide medications to patients prior to discharge. Patients will be given option to opt out.
- MOR has been one before and has reviewed the self-inspection form on the BOP website and is registered with PMP
- Staffing will be appropriate and expand as services increase
- HCQ/DCP will be notified of this by the pharmacy to ensure they are aware of the hospital space being used for this retail pharmacy.

**Action:**

Motion by M. Godek, seconded T. Fensky, and voted unanimously to approve this new community pharmacy upon successful inspection.

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**TOPIC VII** **FLEX** **Time 9:21 AM**

**1. Introduction of Staff: (Carolyn Reid; Joanna Chow; Mia Merideth) Time: 9:15 AM**

**Presented by:** D. SENCABAUGH

**Discussion:** D. SENCABAUGH introduced and thanked all three listed staff members for their work and for continuously going above and beyond exceeded expectations.

**Action:** So noted

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**2. Board Approved CE in 2018**

**Time: 9:00 AM**

**Presented by:** M. CHAN

**Discussion:** M. CHAN reviewed the list of 155 continuing education programs that had been approved by Board staff in 2018. S. HAMILTON asked if CE's that were Board approved by Massachusetts would be accepted in another state. M. CHAN responded that it would be up to each state whether these programs would be acceptable.

**Action:** So noted

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### **3. Chapter 157 of 2018 (tobacco sale prohibition in pharmacy)**

**Time: 9:02 AM**

**Presented by:** M. BOTTO

**Discussion:** M. BOTTO noted that as of December 31, 2018, in accordance with Chapter 157 of the Acts of 2018, healthcare institutions in Massachusetts are no longer permitted tobacco products, including e-cigarettes or other similar products that rely on vaporization or aerosolization. The law defines healthcare institutions as "(i) an individual, partnership, association, corporation or trust or a person or group of persons that provides health care services and employs health care providers subject to licensing under this chapter MGL Ch. 112, or (ii) a retail establishment that sells pharmaceutical goods and services and is subject to regulation by the board of registration in pharmacy." This definition includes any larger retail space, including a department store or supermarket that has a pharmacy located within it.

**Action:** So noted

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### **4. Baystate Medical Center/Brigham & Women's Pilot Project Update**

**Time: 9:20 AM**

**Presented by:** E. TAYLOR and C. BELISLE

**Discussion:** E. TAYLOR and C. BELISLE presented their pilot project progress of "technology-check-technician" in institutional settings. C. BELISLE stated that the pilot only included non-patient specific, non-compounded Schedule VI drugs only. M. GODEK then asked what the procedure was if a medication was recalled. C. BELISLE stated that the medication must be manually pulled in such a scenario. W. FRISCH stated that it may take a while to re-word 247 CMR 8.04, but the idea is to initiate a policy in the near future implementing "technology-check-technician" in the state of Massachusetts.

**Action:** Motion by M. GODEK, seconded by T. FENSKY and voted unanimously by all those present to allow continuation of the pilot project until the waiver process is completed.

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### **5. New England Compounding Center**

**Presented by:** H. ENGMAN

**Time: 9:55 AM**

**Recusal:** A. STEIN recused and was not present for the discussion or vote on this matter.

**Discussion:** H. ENGMAN opened discussion stating that there are a total of six individuals involved, 5 licensees and 1 non-licensee. H. ENGMAN distributed a chart listing all involved, as well as the crimes

and verdicts pertaining to each individual. H. ENGMAN further explained the definitions of the crimes such as racketeering, mail fraud, misbranding, and conspiracy to fraud USA. H. ENGMAN states that the Board had not yet opened complaints against these individuals as the federal government had maintained all documentation until after the trials.

**Action:** Motion by T. FENSKY, seconded by M. GODEK and voted unanimously by all those present to open complaints against the four licensees (G. SVIRSKIY, C. LEARY, S, CARTER, and A, STEPANETS) that were convicted of said charges in federal court.

**Action:** Motion by T. FENSKY, seconded by M. GODEK and voted unanimously by all those present to not open any complaints against the one individual (J. EVANOSKY) who was not convicted in federal court.

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**TOPIC VIII: FILE REVIEW**

Case #1  
SA-INV-13964                                      Briova RX DS89743                                      Time:

DEFERRED

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Case #2  
SA-INV-14002                                      Briova RX DS89744                                      Time: 10:06 AM  
Presented by: G. MELTON  
RECSUAL: None

DISCUSSION:

- BriovaRx was depoting specialty prescriptions to CVS #4471 in Springfield, MA.
- MOR Mello was unaware that the prescription in question delivered on 6/29/18 remained unclaimed by the patient as of the day of inspection (9/6/18) at CVS #4471.
- DS had no formal agreement or policies in place for this process, including no return policy if patient did not pick up the prescription.
- MOR stated that CVS served in a limited capacity as a point of delivery at the patient’s request when their home or work address was not suitable.
- MOR stated that the use of CVS’ address for delivery upon request by a patient was no different than a request for delivery to work or home.

ACTION: Motion by M. GODEK, seconded by T. FENSKY, and voted unanimously by those present, to CLOSE SA-INV-14002 upon receipt of new SOP confirming the ultimate user receives the prescriptions and a return policy for unclaimed prescriptions within 60 days.

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Case #3  
SA-INV-13992                                      CVS #4771 DS3552                                      Time: 10:14 AM  
Presented by: G.MELTON  
RECUSAL: S. CORNACCHIO was recused and not present for the discussion or vote on this matter.

DISCUSSION:

- During ISP-10404 on 9/6/18 it was observed that a prescription with BrivoRx Specialty Pharmacy labels was in CVS' waiting bin.
- The prescription in question was filled on 6/29/18, delivered to CVS #4471 and not picked up by the patient.
- Staff was under the impression that a "contract" existed but could not provide further details.
- On 9/28/18 Investigator Brosnan returned to CVS#4471 to gather more information at which time he observed the prescription in question was still on site.
- MOR Roxo indicated the prescription was in the process of being returned to BrivoRx.
- MOR Roxo indicated that BrivoRx contacted him for permission to deliver to CVS#4471 for every transaction.
- CA: going forward, the pharmacy team will only receive prescriptions from CVS Specialty Pharmacy unless a documented arrangement has been made with another specialty pharmacy.

ACTION: Motion by M. GODEK, seconded by K. TANZER, and voted unanimously by those present, to CLOSE SA-INV-13992, no discipline warranted, remediation complete.

Case #4

PHA-2018-0067

CVS #1785 DS3348

Time: 10:16 AM

Presented by: K. MORTON

RECUSAL: S. CORNACCHIO was recused and not present for the discussion or vote on this matter.

DISCUSSION:

- Complaint against CVS #1875 as a result of an initial notification of a suspected loss of #168 oxycodone 5mg tablets on or about June 8, 2018, as well as a failure to timely report a confirmed loss of controlled substances that occurred on or about July 11, 2018
- MOR indicated the suspected loss of #168 oxycodone 5mg tablets on or about June 8, 2018 was as a result of a completed prescription falling into the trash. Security footage was submitted showing the prescription falling into the trash.
- On 7/20/18, OPP received an initial notification of a suspected loss of #500 tramadol 50mg tablets, #5 APAP/ Codeine 300-30mg tablets, and #20 tramadol/ APAP 37.5/325mg tablets on or about 7/11/18 as a result of employee pilferage.
- A final RLCS report was not submitted within 21 days, by 8/10/18 in accordance with Board Policy 2016-02. It was submitted 9/14/18, 57 days after the initial notification and 35 days past the 8/10/18 deadline.
- CA- MOR stated, "I will review how to properly handle a drug loss and the follow up time given for filing initial and continuing notifications."

ACTION: Motion by T. FENSKY, seconded by L. GIAMBARRESI, and voted unanimously by those present, to refer the matter to the office of prosecution for the issuance of an order to show cause and authorize a consent agreement for reprimand.

Case #5

SA-INV-13887

CVS #2098 DS2768

Time: 10:20 AM

Presented by: G. MELTON

RECUSAL: S. CORNACCHIO was recused and not present for the discussion or vote on this matter.

DISCUSSION:

- 7-16-18: RLCS-suspected theft 60 amphetamine combo 30mg ER capsules & lisdexamfetamine 50mg capsules.
- Pharmacy Cashier (non-licensee) admitted verbally during an interview with asset protection that she stole the amphetamine and lisdexamfetamine by removing the completed Rx's from the waiting bin.
- She passed them to a co-conspirator at her register without ringing the Rx's out.
- She started to write her statement and later recanted her verbal admission and wrote that she accidentally failed to ring the Rx's out. She then refused to answer any further questions and left the interview.
- 8-9-18: Patient reported receiving 32 empty amphetamine combo 10mg ER capsules out of 60 capsules in her prescription.
- CVS #2098 contacted the patient's practitioner to authorize an exchange.
- Practitioner denied the request because the patient never contacted the office to report the empty capsules. Practitioner also indicated that he has a no replacement/refill policy for ADHD and the patient was aware of his policy.
- CVS #2098 checked all remaining stock of amphetamine and no empty capsules were found. The Pharmacy also reported that no other patients complained about empty capsules.
- Investigator Melton contacted Shire Pharmaceuticals (manufacturer) and Shire described that QA for the capsules involves weighing of every capsule and no other issues with empty capsules had been reported.
- CA - Cashier was terminated from employment and incident reported to the police. Police have not charged the cashier as of 12-11-18. In addition, CVS added surveillance cameras to provide wall to wall coverage of the pharmacy after asset protection discovered that the waiting bin was not covered by the surveillance when the theft occurred. Thus, the cashier was not captured on video stealing the Rx's. Of note, patient with empty capsules continues to fill monthly Rx's at CVS #2098 for Schedule II, IV, & VI controlled substances w/o further complaints.

ACTION: Motion by L. GIAMBARRESI, seconded by K. TANZER, and voted unanimously by those present, to CLOSE SA-INV-13887, no discipline warranted, and remediation complete.

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Case #6

PHA-2018-0036

CVS #4073 DS89722

Time: 10:25 AM

Presented by: C. MOGNI

RECUSAL: S. CORNACCHIO was recused and not present for the discussion or vote on this matter.

DISCUSSION:

- RLCS of #10 fentanyl 50 mcg and #5 fentanyl 75 mcg final report received 4/26/18 with unknown loss identified during a cycle count on 3/28/18;
- A review of video footage from 3/22/18 showed Pharmacist Lubinski getting 3 boxes of fentanyl from the safe, obtaining 2 boxes of fentanyl out of a tote, filling 2 prescriptions for one patient for 4 total boxes of fentanyl (#10 each), then returning 1 box of fentanyl to the tote;
- Pharmacist Lubinski had received a CII order of #20 fentanyl 50mcg, used #10 to fill the prescription, and left #10 in the tote. Those fentanyl patches supposedly remained in the tote that was picked up by the driver on 3/23/18;
- CVS Corporate provided a response to the complaint which only addressed the loss of 2 boxes of fentanyl and indicated that the wholesaler never received any fentanyl back from the Pharmacy;
- CA: Pharmacist Lubinski was counseled on the appropriate handling of controlled substances and has changed his practice by adding CIIs to the inventory as soon as possible upon receipt and placing CIIs



into the safe following check-in, back-counting CII after filling a prescription, and verifying totes are empty prior to pick up; P&Ps for controlled substance handling was reviewed with all pharmacy staff with the policies signed, dated, and submitted by all staff.

- Deficiencies for ISP-9349 on 4/9/18 cited including MOR Patel absent from the Pharmacy on 3 occasions for approximately 20 minutes each during the inspection; refrigerated products moved to the front store refrigerator 9am 3/28/18 to 9pm 3/29/18;
- failure to reconcile the perpetual inventory for 2 of 6 drugs reviewed including the fentanyl 75 mcg patches identified as the above loss; POC received on 4/30/18 from CVS Corporate indicating P&Ps (all provided) reviewed with all staff for maintaining security of the Pharmacy including during the temporary absence of the pharmacist, proper action for refrigeration excursions, and reconciliation of the perpetual inventory;
- MOR Patel was absent from the Pharmacy because she was meeting with PDM McDowell and the DEA regarding the RLCS of the fentanyl patches; refrigerated products were moved to the front store because the pharmacist on duty panicked when the alarm alerted; and no additional information was provided regarding the failure to reconcile the perpetual inventory every 10 days except for the related P&P signed and dated by MOR Patel and Pharmacist Lubinski;
- Inspection (ISP-10462) performed 9/11/18 was deemed satisfactory.

ACTION: Motion by T. FENSKY, seconded by M. GODEK, and voted unanimously by those present, to refer the matter to the office of prosecution for the issuance of an order to show cause and authorize a consent agreement for reprimand.

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Case #7

PHA-2018-0040 Pharmacy Corporation of America DS3599

Time: 10:30 AM

Presented by: C. MOGNI

RECUSAL: None

DISCUSSION:

- Inspectional deficiencies (ISP-9748) on 5/10/18: expired/damaged CII stored in tamper-resistant bags not on perpetual inventory with damaged CII not reconciled from 6/4/16 to 5/10/18 and expired CII not reconciled from 4/8/18 to 5/10/18;
- no naloxone standing order. Notation on inspection indicated controlled substances were being delivered to LTCFs prior to the receipt of a hardcopy with MOR Lynch stating that the hardcopy was needed as the nurse ordering the controlled substance was not an agent of the prescriber.
- POC on 6/11/18 indicated all expired/damaged CII will be stored in a manner that would allow them to be reconciled and naloxone standing order was obtained;
- proof of return of expired/damaged CII was submitted. In response to the complaint, MOR Lynch stated no controlled substances are dispensed without a prescription from the prescriber but in a contradictory statement, MOR Lynch stated that a hardcopy prescription is requested "in those cases where the nurse may not be an authorized agent".
- Manifests with corresponding CII prescriptions from 4/10/18 to 5/10/18 were provided with 372 manifests (including faxed CII prescription) indicating hardcopies needed for CII prescriptions dispensed. 60 of 372 hardcopies not received and 26 additional manifests with no faxed or hardcopy CII prescription. PharMerica SOP "Courier Control Script Exchange Process" provided indicating PharMerica does dispense controlled substance medications prior to the receipt of hardcopy prescription.

ACTION: Motion by M. GODEK, seconded by T. FENSKY, and voted unanimously by those present, to refer the matter to the office of prosecution for the issuance of an order to show cause and authorize a consent agreement for probation for a period of 1 year.

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Case #8

PHA-2018-0070 Stop and Shop #17 DS3084

Time: 10:39 AM

Presented by: C. MOGNI

RECUSAL: D. PERRY and J. TRAN were recused and not present for the discussion or vote on this matter.

DISCUSSION:

- RLCS on 9/7/18 indicating a loss of #100 morphine sulfate ER 15 mg tablets discovered on 08/18/2018 while performing a back count when filling a prescription. Internal investigation included review of the biennial inventory, perpetual inventory, cycle counts, and inventory reports.
- Security camera footage was reviewed, but inconclusive. The Pharmacy contacted the person who filled a prescription for morphine sulfate ER 15 mg tablets on the same day, but he alleged an additional 100 tablets were not dispensed.
- No additional information identifying the cause of the loss was provided in response to the complaint.
- CA: Security cameras were adjusted to provide better visibility to the pharmacy counters and policies and procedures related to controlled substance handling and recordkeeping were reviewed.

ACTION: Motion by M. GODEK, seconded by T. FENSKY, and voted unanimously by those present, to refer the matter to the office of prosecution for the issuance of an order to show cause and authorize a consent agreement for reprimand.

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Case #9

PHA-2018-0053 Rite Aid #10096 DS90175

Time: 10:41

RECUSAL: M. GODEK was recused and not present for the discussion or vote on this matter.

DISCUSSION:

- RLCS- #25 hydrocodone/apap 7.5/325mg tablets as a result of an unknown loss.
- Internal audits conducted, and covert counts conducted for all hydrocodone-containing products for period of 60 days from date of discovery with no discrepancies.
- Policies and procedures related to handling and dispensing of controlled substances were reviewed with the pharmacy manager and staff pharmacist.
- No prior reported losses.

ACTION: Motion by T. FENSKY, seconded by L. GIAMBARRESI, and voted unanimously by those present, to refer the matter to the office of prosecution for the issuance of an order to show cause and authorize a consent agreement for reprimand.

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Case #10

SA-INV-13917 Alison Parker PH234644

Time: 10:43 AM

Presented by: J. SANTORO

RECUSAL: None

DISCUSSION: J. SANTORO presented and summarized the investigative report that pertained to these matters.

- Repeat self-reported CE deficiency in 2017. PH previously remediated in 2016 for a 2015 CE deficiency. Also determined deficient in 2016.
- In 2017 PH had a deficiency of 5.25 CE credits including 1.25 credits in any topic, 3-live, 1 sterile compounding License also had a deficiency in 2016 of 3.5 CDTM related credits
- Licensee stated she was unaware of CE requirements for pharmacist working under a collaborative practice agreement
- Licensee indicated that she did not claim live CE credits at a conference she attended in 2017 and therefore completed 2 live CE credits
- Licensee was engaged in and oversaw sterile and complex non-sterile compounding in 2016 and 2017, she participated in a CDTM agreement in 2016 only, she engaged in immunization activities in 2016 and 2017. •Licensee is aware that any continuing education credits completed to remediate her 2016 and 2017 deficiencies shall not be used to fulfill any other continuing education requirements.
- To remediate her 2016 and 2017 deficiencies, the Licensee earned 29.25 credits including 3.25-live, 1 sterile compounding and 9.5 CDTM related CE credits in 2018

ACTION: Motion by M. GODEK, seconded by K. TANZER, and voted unanimously by those present, to CLOSE SA-INV-13917, no discipline warranted, and remediation complete.

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**Topic IX** **EXECUTIVE SESSION** **Time: 10:46 AM**  
**Read by A. Stein**

DISCUSSION:

ACTION: At 10:46 AM President A. Stein read the statement on reasons for Executive Session.

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**Topic X:** **Executive Session Call to Order:** **Time: 11:50 AM**  
By: M. Godek

ACTION: Motion by P. Gannon, seconded by L Giambarresi, and voted unanimously by roll call to call the February 7, 2019 meeting of the Executive Session to order.

Roll call attendance: M. Godek, yes; A. Stein, yes; K. Tanzer, yes; P. Gannon, yes; J. Lanza, yes; T. Fensky, yes; S. Hamilton, yes; L. Giambarresi, yes; S. Hernandez, yes.

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**Topic X:** **Adjudicatory Session (M.G.L. ch 30A § 18)** **Time: 11:04 AM**

DISCUSSION: None

ACTION: President A. Stein request a motion to enter Adjudicatory Session.

At 1:14 PM L. Giambarresi, seconded by K. Tanzer and voted unanimously by all those present to enter Adjudicatory Session:

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**Topic XI:**

**M.G.L. 65 C**

**Time: 11:07 AM**

DISCUSSION: None

ACTION: President A. Stein request a motion to enter M.G.L 65 c Session.

At 11:32 AM S. Hernandez, seconded by P. Gannon and voted unanimously by all those present to enter M.G.L. chapter 65 c Session:

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**LUNCH**

**Time out: 11:51 AM**

**Time back: 1:10 PM**

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**Topic XII:**

**ADJOURNMENT OF MEETING**

**TIME: 2:43 PM**

ACTION: Motion by T. Fensky seconded by S. Hernandez, and voted unanimously by those present, to adjourn from General Session.

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EXHIBITS USED DURING THE OPEN SESSION OF THE MEETING

1. Draft Agenda of the 1/10/19 General Session
2. Draft Minutes of the 12/6/18 Meeting
3. Report on Applications approved pursuant to Licensure Policy 13-01
4. Report on probation
5. Report on Board Delegated Complaint Review to licensure policy 14-02
6. Report on Above Action Levels approved by Staff Action 16-04
7. Staff Action Policy 17-03: Petitions for Retirement Status
8. Joint Policy 2018-01: Permitted prescription changes and additions
9. Circle Health Pharmacy: At Lowell General Hospital-New Community Pharmacy
10. SA-INV-13964 Briova Rx- DS89743
11. SA-INV-14002 Briova Rx- DS89744
12. SA-INV-13992 CVS #4471- DS3552
13. PHA-2018-0067 CVS #1875- DS3348
14. SA-INV-13887 CVS #2098- DS2768
15. PHA-2018-0036 CVS #4073- DS89722
16. PHA-2018-0040 Pharmacy Corporation of America- DS3599
17. PHA-2018-0070 Stop & Shop #17- DS3084
18. PHA-2018-0053 Rite Aid #10096- DS90175
19. SA-INV-13917 Alison Parker- PH234644

Respectfully Submitted,  
Julie Lanza, CPhT, Secretary