



**California State Board of Pharmacy**  
2720 Gateway Oaks Drive, Suite 100  
Sacramento, CA 95833  
Phone: (916) 518-3100 Fax: (916) 574-8618  
www.pharmacy.ca.gov

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



### **LICENSING COMMITTEE REPORT**

Debbie Veale, Licensee Member, Chairperson  
Seung Oh, Licensee Member, Vice-Chairperson  
Lavanza Butler, Licensee Member  
Jignesh Patel, Licensee Member  
Jason Weisz, Public Member

The Board will review a summary of the committee's work at its January 19, 2022, meeting, as well as updates for discussion and action as necessary.

**a. Discussion and Consideration of Business and Professions Code Section 4071.1 Board's Waiver to Facilitate Provisions for Remote Processing and Consideration of Possible Changes in the Law to Establish Permanent Authority Under Specified Conditions**

Relevant Law

[BPC 4036](#) provides the definition of a pharmacy. As included in the provision, the holder of an unexpired and active pharmacist license is entitled to practice pharmacy as defined, within or outside of a licensed pharmacist **as authorized by this chapter**.

[BPC section 4038](#) specifies that pharmacy technicians are wholly and exclusively permitted to practice only within a licensed pharmacy.

[BPC section 4115](#) specifies that a pharmacy technician may perform packaging, manipulative, repetitive or other nondiscretionary tasks, only while assisting, and while under the direct supervision and control of a pharmacist.

[BPC 4023.5](#) defines "direct supervision and control" to require that a pharmacist is on the premises at all times and is fully aware of all activities performed by either a pharmacy technician or intern pharmacist.

[BPC section 4071.1](#) establishes the authority for a prescriber authorized agent or a pharmacist to electronically enter a prescription or an order into a pharmacy's or hospital's computer from any location outside of the pharmacy or hospital with the permission of the pharmacy or the hospital, under specified conditions. Included in this provision is an explicit prohibition on such authority for controlled substances. Further, this section does not permit a pharmacist to perform other steps in the dispensing process, nor does it allow other pharmacy staff to perform functions remotely.

### **Remote Processing Waiver**

For the purposes of this waiver, "remote processing" means the entering of an order or prescription into a computer from outside of the pharmacy or hospital for a licensed pharmacy as defined in Business and Professions Code (BPC) sections 4029 and 4037.

In addition to the provisions of BPC section 4071.1(a), pharmacists performing remote processing may also receive, interpret, evaluate, clarify, and approve medication orders and prescriptions, including medication orders and prescriptions for controlled substances classified in Schedule II, III, IV or V. Under this waiver, remote processing may also include order entry, other data entry, performing prospective drug utilization review, interpreting clinical data, insurance processing, performing therapeutic interventions, providing drug information services, and authorizing release of medication for administration. The waiver does not include the dispensing of a drug or final product verification by remote processing.

Further, this waiver expands the provisions of BPC section 4071.1(a) to allow for remote processing by pharmacy technicians and pharmacy interns to include nondiscretionary tasks, including prescription or order entry, other data entry, and insurance processing of prescriptions and medication orders for which supervision by a pharmacist is provided using remote supervision via technology that, at a minimum, ensures a pharmacist is (1) readily available to answer questions of a pharmacy intern or pharmacy technician; and (2) verify the work performed by the pharmacy intern or pharmacy technician.

### Background

In response to the COVID-19 pandemic and the early need to promote physical distancing, the Board approved the expanded use of remote processing to facilitate physical distancing while balancing continuity of patient care. As the pandemic has evolved, the waiver was used on both a broad basis and site-specific based on the dynamic conditions at the time. Most recently the Board voted to extend the [broad waiver](#) through either December 31, 2021, or 30 days after the declared emergency is lifted, whichever is later.

During the October 2021 Committee meeting, began its discussion to evaluate what, if any, changes to the law are appropriate to allow for some form of remote processing or other work on a permanent basis.

During the meeting members considered several policy questions. Members appeared to reach consensus on several items including:

1. Review of the issue must be thorough and focused on improved patient care.
2. Remote processing allows for flexibility for pharmacy staff.
3. If expansion of remote processing is approved, the PIC should be delegated with explicit authority to make the decision about the of remote processing.
4. Provisions for remote processing should be limited to California pharmacies.
5. HIPAA breaches should be reported to the Board.

The Committee also considered if notification to the Board should be required if a pharmacy is allowing remote processing as well as remote processing should be limited to when the pharmacy is open.

The Committee also requested information on what the law provided currently. Provided below is a summary chart.

Pharmacist Authority	Current Law	Waiver
Order Entry – Noncontrolled substance	Yes	Yes
Order Entry – Controlled Substance	No	Yes
Product Verification	No	No

**Note:** Neither existing law nor provisions of the waiver allow for storage of records at a remote location.

Pharmacist Technician Authority	Current Law	Waiver
Order Entry – Noncontrolled substance	No	Yes
Order Entry – Controlled Substance	No	Yes

**Note:** Neither existing law nor provisions of the waiver allow for storage of records at a remote location or other duties to be performed remotely unless expressly authorized by pharmacy law or the waiver.

Members also requested information on the requirements for notification of a HIPAA breach. The HIPAA Breach notification rule 5 CFR §§ 164.400-414, requires HIPAA-covered entities and their business associates to provide notification following a breach of unsecured protected health information. Similar breach notification provisions implemented and enforced by the [Federal Trade Commission \(FTC\)](#), apply to vendors of personal health records and their third party service providers, pursuant to section 13407 of the HITECH Act.

The Department of Health and Human Services (HHS) provides information on the definition of a breach, which is generally an impermissible use or disclosure under the Privacy Rule that compromises the security or privacy of the protected information.

Information from HHS specifies that, following a breach of unsecured protected health information, covered entities must provide notification of the breach to affected individuals, the Secretary, and, in certain circumstances, to the media.

Covered entities must provide individual notices to affected individuals following the discovery of a breach of unsecured protected health information.

[Summary of Committee Discussion and Action](#)

During the meeting the Committee first considered the Board's current remote processing waiver provisions related to pharmacies and pharmacists. The Committee noted urgency is conducting its evaluation of the issue.

Members determined that it is appropriate for the Board to make permanent the provisions of the waiver related to pharmacies and pharmacists. As part of its discussion members noted the benefits of remote process and how it will allow pharmacists at a brick and mortar pharmacy to provide more clinical services.

Members determined that the safeguards included in the waiver are appropriate and should be included in the permanent authority. Members also determined that additional safeguards are necessary including:

1. The pharmacy must use biometrics or something similar to ensure the identity of the pharmacist working remotely.
2. The PIC should be delegated with the authority to determine the use of remote processing.
3. The provisions are limited to California licensed pharmacies within California and that pharmacists performing remote functions must do so in California.
4. The Board will be notified of HIPAA breaches.
5. Remote processing functions may be performed even when the pharmacy is closed.

Public comment included support for the proposal. Public comment suggested that the permanent authority should provide flexibility to allow for remote practice outside of California and should include provisions for offsite storage of records.

**Committee Recommendation:** The Committee recommends to the Board pursuit of a statutory proposal including directing staff and the President to draft a statutory proposal consistent with the provisions of the waiver and the additional items determined appropriate by the Committee [items 1-5 above].

Following discussion on provisions related to pharmacies and pharmacists, the Committee also considered the waiver provisions related to pharmacist interns and pharmacy technicians. After review of the current waiver provisions related to pharmacist interns and pharmacy technicians, members did not reach agreement on this policy question.

The Committee determined that the issue of remote practice for pharmacy technicians should be considered as part of the Pharmacy Technician Summit.

Public comment included support for making the provisions of the Board's waiver permanent for pharmacist interns and pharmacy technicians. Comments also included that the issue of ratios needs to be considered and the extent to which remote supervisions by a pharmacist working remotely would be allowed. Members were advised that 19 states have permanent allowances for pharmacy technicians. Comments also suggested support for remote work by licensed individuals.

**Committee Recommendation:** Recommend to the Board that this issue related to remote processing by pharmacy technicians be considered as part of the Pharmacy Technician Summit.

**b. Discussion and Consideration of Requirements to Serve as a Pharmacist-In-Charge**

Relevant Law

There are numerous provisions within Pharmacy Law and its regulations establishing requirements for a pharmacist-in-charge (PIC), including the roles and responsibilities, etc. Two primary sections include:

1. [BPC section 4036.5](#) defines a “pharmacist-in-charge” as a pharmacist proposed by a pharmacy and approved by the board as the supervisor or manager responsible for ensuring the pharmacy’s compliance with all state and federal laws and regulations pertaining to the practice of pharmacy.
2. [BPC section 4113](#) provides in part that every pharmacy shall designate a PIC. Further, the pharmacy is responsible for compliance with all state and federal laws and regulations pertaining to the practice of pharmacy.

In addition to relevant sections of law, the Board also designated a precedential decision ([Sternberg v. California State Board of Pharmacy \(2015\) 239 Cal.App.4<sup>th</sup> 1159 California Court of Appeal, Second District, Division Eight, Case No. B255865](#)) that confirmed that a pharmacist-in-charge of a pharmacy could be disciplined for a pharmacy’s violation of Section 4081 resulting from a pharmacy technician’s theft of controlled substances without the pharmacist having actual knowledge of, or authorizing, the violations.

Background

During its recent strategic planning session, the Board established a strategic objective to determine if the application requirements for a PIC are appropriate to ensure sufficient knowledge, skills and abilities for individuals seeking to serve as a PIC.

It is not uncommon for investigations to substantiate violations where a pharmacist may be designated as a PIC in name only or the designated PIC fails to exercise appropriate oversight of the operations. Although the egregiousness of the violations varies there are many instances where such an individual pharmacist ultimately is disciplined including losing their pharmacist license through the administrative process.

During its last meeting members initiated an assessment of the issue and considered several policy questions. Members ultimately reached agreement that the Board should develop a training program for proposed PICs as well as require an attestation by a proposed PIC.

Summary of Committee Discussion and Action

The Committee review the draft attestation included in the meeting materials which states the following:

*I certify under penalty of perjury under the laws of the State of California that I understand and accept the responsibility for the above referenced pharmacy's compliance with all state and federal laws and regulations pertaining to the practice of pharmacy as required in Business and Professions Code section 4113(c). Further, I understand it is unlawful for any pharmacy owner to commit any act that would subvert or tend to subvert the efforts of me as the pharmacist-in-charge to comply with the laws governing the operation of the pharmacy as provided in Business and Professions Code section 4330(b).*

Members noted agreement with the attestation language and determined that completion of the attestation is appropriate every time a pharmacist is appointed as a PIC.

The Committee also considered the following components to be included in a training program for PICs:

1. Legal requirements for a PIC and the Sternberg decision.
2. Legal requirements and overview of the self-assessment process.
3. Information on how to prepare for an inspection.
4. Legal prohibition for a pharmacy owner to subvert or tend to subvert the efforts of a PIC to comply with the laws governing the operation of a pharmacy.
5. Top violations that result in the issuance of a citation and fine.

Members noted agreement with the proposed training program and after consideration determined that the training should be provided by the Board. Further, after discussion and consideration, the Committee determined the training should be required to be completed within the last two years prior to appointment.

Public comment included support but stated that the training should be either Board provided or Board approved.

**Committee Recommendation:** Recommend initiation of a rulemaking to amend CCR section 1709.1 based on the policy discussions which includes modification to the language to require the training to be completed within two years of appointment. Authorize the chair and executive officer to further refine the language consistent with the policy discussions as may be required by control agencies (DCA or Agency). Additionally, authorize the executive officer to make any non-substantive changes prior to initiation of the rulemaking. Further, if no adverse comments are received during the 45-day comment period and no hearing is requested, authorize the executive officer to take all steps necessary to complete the rulemaking and adopt the proposed regulation at section 1709.1 as noticed for public comment.

**Attachment 1** includes the proposed regulation language as approved by the Committee.

**c. Discussion and Consideration of Renewal Process for Pharmacists and Possible Changes to Consolidate all CE requirements or training requirements into one place**

Relevant Law

BPC section 4231 generally establishes the requirements for a pharmacy to successfully complete 30 hours of approved courses of continuing pharmacy education during the two years preceding the application for renewal as specified.

BPC section 4052.3 (b) provides authority for a pharmacist to furnish emergency contraception drug therapy under specified conditions. Further this section provides that prior to performing such furnishing such therapy, a pharmacist shall complete a training program on emergency contraception that consists of at least one hour of approved continuing education on emergency contraception drug therapy.

BPC section 4052.8 provides authority for a pharmacist to independently initiate and administer an immunization under specified conditions, including completing a training program endorsed by the CDC or ACPE. CCR section 1746.4 further provides that a pharmacist must complete one hour of continuing education focused on immunizations and vaccines from an approved provider once every two years.

BPC section 4052.9 provides authority for a pharmacist to furnish nicotine replace products under specified conditions, including that a pharmacist completes one hour of continuing education focused on smoking cessation therapy biennially.

BPC section 4052 (a)(10) provides authority for pharmacists to furnish medications not requiring diagnosis for individuals traveling outside of the US under specified conditions. CCR section 1746.5 further details the requirements which include that a pharmacist must complete two hours of ongoing continuing education focused on travel medicine, as specified.

BPC section 4232.5 provides that a pharmacist who prescribes controlled substances, must have completed an education course on the risks of addiction associated with the use of Schedule II drugs.

Background

As part of the Board's discussion on implementation of provisions of Assembly Bill 1533, it was recommended that the Licensing Committee consider updating the renewal requirements to consolidate the various CE requirements in one place

Summary of Committee Discussion and Action

During the members review proposed amendment to CCR section 1732.5, Renewal Requirements for Pharmacists. Members noted support for the proposed language.

Members of the public were provided with the opportunity to provide public comment; however, no comments were provided.

**Committee Recommendation:** Recommend initiation of a rulemaking to amend CCR section 1732.5 as presented. Authorize the chair and executive officer to further refine the language consistent with the policy discussions as may be required by control agencies (DCA or Agency). Additionally, authorize the executive officer to make any non-substantive changes prior to initiation of the rulemaking. Further, if no adverse comments are received during the 45-day comment period and no hearing is requested, authorize the executive officer to take all steps necessary to complete the rulemaking and adopt the proposed regulation at section 1732.5 as noticed for public comment.

**Attachment 2** includes a copy of the proposed language.

**d. Discussion and Consideration of CCR Section 1730.1 Related to Application Requirements for Advanced Practice Pharmacist Licensure Including Possible Amendments**

Relevant Law

BPC section 4210 establishes the requirements for a person seeking recognition as an advanced practice pharmacist. CCR section 1730.1 further defines the requirements described in section 4210.

Background

Assembly Bill 1533 amended Section 4210 to alter the application requirements for advanced practice pharmacist recognition to allow for qualification under a single pathway, if that pathway includes completion of a second criterion. This clarifies the requirements and eliminates the current confusing language.

It appears appropriate to make conforming changes to the regulation section to avoid conflicts between the statute and regulation and ensure clear implementation of the policy goal achieved in AB 1533.

Summary of Committee Discussion and Action

The Committee reviewed proposed amendments to CCR section 1730.1, Application Requirements for Advanced Practice Pharmacist Licensure. Members noted agreement with the proposed language.

Members of the public were provided with the opportunity to provide public comment; however, no comments were provided.

**Committee Recommendation:** Recommend initiation of a rulemaking to amend CCR section 1730.1 as presented. Authorize the chair and executive officer to further refine the language consistent with the policy discussions as may be required by control agencies (DCA or Agency). Additionally, authorize the executive officer to make any non-



substantive changes prior to initiation of the rulemaking. Further, if no adverse comments are received during the 45-day comment period and no hearing is requested, authorize the executive officer to take all steps necessary to complete the rulemaking and adopt the proposed regulation at section 1730.1 as noticed for public comment..

**Attachment 3** includes a copy of the proposed language.

#### **e. Review and Discussion of Licensing Statistics**

The quarterly licensing statistics for the first six months of fiscal year 2021/2022 are provided in **Attachment 4**.

As of December 31, 2021, the Board has received 7,485 initial applications, including:

- 1,241 intern pharmacists
- 1,533 pharmacist exam applications (400 new, 1,133 retake)
- 65 advanced practice pharmacists
- 2,488 pharmacy technicians
- 228 community pharmacy license applications (223 PHY - - 85 chain, 138 nonchain, 4 PHE, 1 PHR)
- 39 sterile compounding pharmacy license applications (36 LSC, 3 LSE, 0 SCP, 0 SCE)
- 71 nonresident pharmacy license applications
- 21 hospital pharmacy license applications

As of December 31, 2021, the Board has received 344 requests for temporary site license applications, including:

- 194 community pharmacy license applications
- 27 sterile compounding pharmacy license applications
- 53 nonresident pharmacy license applications
- 21 hospital pharmacy license applications

As of December 31, 2021, the Board has issued 5,962 individual licenses, including:

- 1,237 intern pharmacists
- 1,296 pharmacists
- 97 advanced practice pharmacists
- 3,150 pharmacy technicians

As of December 31, 2021, the Board has issued 188 site licenses without temporary license requests, including:

- 93 automated drug delivery systems (79 AUD, 14 APD)
- 47 community pharmacies
- 3 hospital pharmacies

As of December 31, 2021, the Board has issued 212 temporary site licenses, including:

- 95 community pharmacies
- 22 hospital pharmacies

Processing Times

<b>Premises Application Types</b>	<b>Application Processing Times as of 10/8/2021</b>	<b>Application Processing Times as of 1/7/2022</b>	<b>Deficiency Mail Processing Times as of 10/8/2021</b>	<b>Deficiency Mail Processing Times as of 1/7/2022</b>
Pharmacy	88	162	115	206
Nonresident Pharmacy	113	165	115	200
Sterile Compounding	67	151	79	169
Nonresident Sterile Compounding	0	50	Mail combined with Sterile	Mail combined with Sterile
Outsourcing	Current	Current	Current	Current
Nonresident Outsourcing	Current	39	92	184
Hospital Satellite Compounding Pharmacy	Current	Current	77	169
Hospital	77	81	78	46
Clinic	28	35	10	84
Wholesaler	29	35	14	106
Nonresident Wholesaler	28	100	18	110
Third-Party Logistics Provider	Current	Current	Current	Current
Nonresident Third-Party Logistics Provider	23	65	17	109
Automated Drug Delivery System	Current	8	Current	Current
Automated Patient Dispensing System	Current	15	Current	Current
Emergency Medical Services Automated Drug Delivery System	Current	Current	Current	Current

<b>Individual Application Type</b>	<b>Application Processing Times as of 10/8/2021</b>	<b>Application Processing Times as of 1/7/2022</b>	<b>Deficiency Mail Processing Times as of 10/8/2021</b>	<b>Deficiency Mail Processing Times as of 1/7/2022</b>
Exam Pharmacist	31	4	23	5
Pharmacist Initial Licensure	1	Current	n/a	n/a
Advanced Practice Pharmacist	Current	Current	Current	15
Intern Pharmacist	31	25	2	4
Pharmacy Technician	24	7	1	4
Designated Representative	31	56	15	15
Designated Representatives-3PL	31	31	Combined with Designated Representative	Combined with Designated Representative
Designated Representatives-Reverse Distributor	Current	Current	Combined with Designated Representative	Combined with Designated Representative
Designated Paramedic	Current	Current	Combined with Designated Representative	Combined with Designated Representative

# **Attachment 1**

## Title 16. Board of Pharmacy Proposed Text

Proposed changes to current regulation text are indicated with ~~single strikethrough~~ for deletions and single underline for additions.

**Amend** Sections 1709.1 of Article 4 of Division 17 of Title 16 of the California Code of Regulations to read:

### § 1709.1. Designation of Pharmacist-In-Charge

(a) The pharmacist-in-charge of a pharmacy shall be employed at that location and shall have responsibility for the daily operation of the pharmacy. Prior to approval of Board, a proposed pharmacist-in-charge shall complete an attestation confirming their understanding of the roles and responsibilities of a pharmacist-in-charge and the legal prohibitions of a pharmacy owner to subvert the efforts of a pharmacist-in-charge. The proposed pharmacist-in-charge shall also provide proof demonstrating completion of a Board provided training course on the role of a pharmacist-in-charge within the past two years.

(b) The pharmacy owner shall vest the pharmacist-in-charge with adequate authority to assure compliance with the laws governing the operation of a pharmacy.

(c) No pharmacist shall be the pharmacist-in-charge of more than two pharmacies. If a pharmacist serves as pharmacist-in-charge at two pharmacies, those pharmacies shall not be separated by a driving distance of more than 50 miles.

(d) No pharmacist shall be the pharmacist-in-charge of a pharmacy while concurrently serving as the designated representative-in-charge for a wholesaler or a veterinary food-animal drug retailer.

(e) Notwithstanding subdivision (a), a pharmacy may designate any pharmacist who is an employee, officer or administrator of the pharmacy or the entity which owns the pharmacy and who is actively involved in the management of the pharmacy on a daily basis as the pharmacist-in-charge for a period not to exceed 120 days. The pharmacy, or the entity which owns the pharmacy, shall be prepared during normal business hours to provide a representative of the board with documentation of the involvement of a pharmacist-in-charge designated pursuant to this subdivision with the pharmacy and efforts to obtain and designate a permanent pharmacist-in-charge.

(f) A pharmacist may refuse to act as a pharmacist-in-charge at a second pharmacy if the pharmacist determines, in the exercise of his or her professional judgment, that assuming responsibility for a second pharmacy would interfere with the effective performance of the pharmacist's responsibilities under the Pharmacy Law. A pharmacist who refuses to become pharmacist-in-charge at a second pharmacy shall notify the pharmacy owner in writing of his or her determination, specifying the circumstances of concern that have led to that determination.

(g) A person employing a pharmacist may not discharge, discipline, or otherwise discriminate against any pharmacist in the terms and conditions of employment for exercising or attempting to exercise in good faith the right established pursuant to this section.

Note: Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4081, 4113, 4305 and 4330, Business and Professions Code.

# **Attachment 2**

## Title 16. Board of Pharmacy Proposed Text

Proposed changes to current regulation text are indicated with ~~single strikethrough~~ for deletions and single underline for additions.

**Amend** Section 1732.5 of Article 4 of Division 17 of Title 16 of the California Code of Regulations to read:

### **§1732.5 Renewal Requirements for Pharmacists**

- (a) Except as provided in Section 4234 of the Business and Professions Code and Section 1732.6 of this Division, each applicant for renewal of a pharmacist license shall submit proof satisfactory to the board, that the applicant has completed 30 hours of continuing education in the prior 24 months.
- (b) At least two (2) of the thirty (30) hours required for pharmacist license renewal shall be completed by participation in a Board provided CE course in Law and Ethics.  
~~Pharmacists renewing their licenses which expire on or after July 1, 2019, shall be subject to the requirements of this subdivision.~~
- (c) If you are providing the following services you must also complete:
  - (1) At least one (1) hour of approved CE biennially, specific to smoking cessation therapy, as required by Section 4052.9 of the Business and Professions Code, if applicable.
  - (2) At least two (2) hours of approved CE biennially, specific to travel medication, as required by Section 1746.5, if applicable.
  - (3) At least one (1) hour of approved CE biennially, specific to immunizations and vaccines, as required by Section 1746.4, if applicable.
  - (4) At least one (1) hour of approved CE once every four (4) years, specific to the risks of addiction associated with the use of Schedule II drugs, as required by Section 4232.5 of the Business and Professions Code.
- (d) A pharmacist who provides emergency contraception shall complete at least one (1) hour of approved continuing education as required by Section 4052.3 of the Business and Professions Code.
- (e) All pharmacists shall retain their certificates of completion for four (4) years following completion of a continuing education course demonstrating compliance with the provisions of this section.

Note: Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4052.3, 4052.8, 4052.9, 4231, and 4232, and 4232.5, Business and Professions Code.

# **Attachment 3**



**Title 16. Board of Pharmacy  
Proposed Text**

Proposed changes to current regulation text are indicated with ~~single strikethrough~~ for deletions and single underline for additions.

***Amend Section 1730.1 to Title 16 of the California Code of Regulations, to read as follows:***

**§ 1730.1. Application Requirements for Advanced Practice Pharmacist Licensure.**

- (a) For purposes of Business and Professions Code section 4210, an applicant for advanced practice pharmacist licensure must satisfy two of the following subsections.
- (1) Demonstrate possession of a current certification as specified in Business and Professions Code section 4210, subdivision (a)(2)(A), by providing either:
    - (A) A copy of the certification award that includes the name of the applicant pharmacist, the area of specialty and date of completion, or
    - (B) A letter from the certification program confirming the award of the certification that includes the name of the applicant pharmacist, the area of specialty and the date of completion.
  - (2) Demonstrate completion of a postgraduate residency earned in the United States through an accredited postgraduate institution as specified in Business and Professions Code section 4210, subdivision (a)(2)(B), by providing either:
    - (A) A copy of the residency certificate awarded by the postgraduate institution that includes the name of the applicant pharmacist, the area of specialty, and dates of participation and completion, or
    - (B) A letter of completion of a postgraduate residency, signed by the dean or residency program director of the postgraduate institution and sent directly to the board from the postgraduate institution, that lists the name of the applicant pharmacist, the area of specialty, and the dates of participation and completion. For an applicant who cannot satisfy this documentation requirement, the board may, for good cause shown, grant a waiver for this subsection.
  - (3) Demonstrate that experience earned under a collaborative practice agreement or protocol, as required by Business and Professions Code section 4210, subdivision (a)(2)(C), has been earned within 10 years of the time of application for advanced practice pharmacist licensure. Additionally, the one year of experience must include no fewer than 1,500 hours of experience providing clinical services to patients. The experience earned under a collaborative practice agreement or protocol must include initiating, adjusting, modifying or discontinuing drug therapy of patients as authorized by law. An applicant shall demonstrate possession of experience by providing both of the following:
    - (A) A written statement from the applicant attesting under penalty of perjury that he or she has:
      - (i) Earned the clinical experience within the required time frame; and

- (ii) Completed the required number of hours of experience providing clinical services to patients, as specified in subsection (a)(3).
  - (I) The applicant shall provide a copy of the collaborative practice agreement or protocol.
  - (II) If a copy of the collaborative practice agreement or protocol is not available, the applicant shall provide a description of the collaborative practice agreement or protocol, including examples of the clinical services the applicant provided to patients.
- (B) A written statement from the supervising practitioner, program director or health facility administrator attesting under penalty of perjury that the applicant has completed at least 1,500 hours of experience providing clinical services to patients. For an applicant who cannot satisfy this documentation requirement, the board may, for good cause shown, grant a waiver for this subsection.
- (b) The experience an applicant offers to demonstrate compliance with one of the three criteria in subsection (a) above may not also be used to satisfy another of the criteria. However, if, as a condition of completion of one of the required criteria, fulfillment of a second criterion is also required, that completion shall satisfy this section.

Note: Authority cited: Sections 4005 and 4210, Business and Professions Code.  
Reference: Sections 4052.1, 4052.2 and 4210, Business and Professions Code.

# **Attachment 4**

CALIFORNIA STATE BOARD OF PHARMACY  
 QUARTERLY LICENSING STATISTICS FISCAL YEAR 2021/2022

APPLICATIONS RECEIVED

Individual Applications	July - Sept	Oct-Dec	Jan-Mar	Apr-Jun	Total FYTD
Designated Representatives (EXC)	89	89	0	0	178
Designated Representatives Vet (EXV)	3	0	0	0	3
Designated Representatives-3PL (DRL)	22	17	0	0	39
Designated Representatives-Reverse Distributor (DRR)	0	0	0	0	0
Designated Paramedic (DPM)	0	1	0	0	1
Intern Pharmacist (INT)	1,148	93	0	0	1,241
Pharmacist Exam Applications	269	131	0	0	400
Pharmacist Retake Exam Applications	644	489	0	0	1,133
Pharmacist Initial License Application (RPH)	845	451	0	0	1,296
Advanced Practice Pharmacist (APH)	35	30	0	0	65
Pharmacy Technician (TCH)	1,354	1,134	0	0	2,488
<b>Total</b>	<b>4,409</b>	<b>2,435</b>	<b>0</b>	<b>0</b>	<b>6,844</b>

Site Applications	July - Sept	Oct-Dec	Jan-Mar	Apr-Jun	Total FYTD
Automated Drug Delivery System (ADD(AUD))	39	38	0	0	77
Automated Drug Delivery System (ADD(APD))	5	1	0	0	6
Automated Drug Delivery System EMS (ADE)	0	0	0	0	0
Automated Patient Dispensing System 340B Clinic (ADC)	0	2	0	0	2
Centralized Hospital Packaging Government Owned (CHE)	0	0	0	0	0
Centralized Hospital Packaging (CHP)	1	0	0	0	1
Clinics (CLN)	31	18	0	0	49
Clinics Government Owned (CLE)	27	7	0	0	34
Drug Room (DRM)	0	0	0	0	0
Drug Room Government Owned (DRE)	0	0	0	0	0
Hospitals (HSP)	19	2	0	0	21
Hospitals Government Owned (HPE)	0	0	0	0	0
Hospital Satellite Sterile Compounding (SCP)	0	0	0	0	0
Hospital Satellite Sterile Compounding Government Owned (SCE)	0	0	0	0	0
Hypodermic Needle and Syringes (HYP)	1	3	0	0	4
Correctional Pharmacy (LCF)	1	0	0	0	1
Outsourcing Facility (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident (NSF)	0	1	0	0	1
Pharmacy (PHY)	81	56	0	0	137
Pharmacy (PHY) Chain	2	83	0	0	85
Pharmacy Government Owned (PHE)	2	1	0	0	3
Remote Dispensing Pharmacy (PHR)	1	0	0	0	1
Pharmacy Nonresident (NRP)	28	43	0	0	71
Sterile Compounding (LSC)	30	6	0	0	36
Sterile Compounding Government Owned (LSE)	1	1	0	0	2
Sterile Compounding Nonresident (NSC)	2	3	0	0	5
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	1	0	0	0	1
Third-Party Logistics Providers Nonresident (NPL)	13	8	0	0	21
Veterinary Food-Animal Drug Retailer (VET)	1	0	0	0	1
Wholesalers (WLS)	14	7	0	0	21
Wholesalers Government Owned (WLE)	0	0	0	0	0
Wholesalers Nonresident (OSD)	35	24	0	0	59
<b>Total</b>	<b>335</b>	<b>304</b>	<b>0</b>	<b>0</b>	<b>639</b>

\*Number of applications received includes the number of temporary applications received.

Applications Received with Temporary License Requests	July - Sept	Oct-Dec	Jan-Mar	Apr-Jun	Total FYTD
Drug Room -Temp (DRM)	0	0	0	0	0
Hospitals - Temp (HSP)	18	3	0	0	21
Hospital Satellite Sterile Compounding - Temp (SCP)	0	0	0	0	0
Outsourcing Facility - Temp (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident - Temp (NSF)	0	0	0	0	0
Pharmacy - Temp (PHY)	61	133	0	0	194
Remote Dispensing Pharmacy - Temp (PHR)	0	0	0	0	0
Pharmacy Nonresident - Temp (NRP)	19	34	0	0	53
Sterile Compounding - Temp (LSC)	22	5	0	0	27
Sterile Compounding Nonresident - Temp (NSC)	2	2	0	0	4
Third-Party Logistics Providers - Temp (TPL)	1	0	0	0	1
Third-Party Logistics Providers Nonresident - Temp (NPL)	2	4	0	0	6
Veterinary Food-Animal Drug Retailer - Temp (VET)	0	0	0	0	0
Wholesalers - Temp (WLS)	8	1	0	0	9
Wholesalers Nonresident - Temp (OSD)	17	12	0	0	29
<b>Total</b>	<b>150</b>	<b>194</b>	<b>0</b>	<b>0</b>	<b>344</b>

**LICENSES ISSUED**

<b>Individual Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representatives (EXC)	118	41	0	0	159
Designated Representatives Vet (EXV)	0	1	0	0	1
Designated Representatives-3PL (DRL)	19	1	0	0	20
Designated Representatives-Reverse Distributor (DRR)	0	3	0	0	3
Designated Paramedic (DPM)	0	0	0	0	0
Intern Pharmacist (INT)	1,035	202	0	0	1,237
Pharmacist (RPH)	834	462	0	0	1,296
Advanced Practice Pharmacist (APH)	22	75	0	0	97
Pharmacy Technician (TCH)	1,420	1,730	0	0	3,150
<b>Total</b>	<b>3,448</b>	<b>2,515</b>	<b>0</b>	<b>0</b>	<b>5,963</b>

<b>Site Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Automated Drug Delivery System (ADD(AUD))	42	37	0	0	79
Automated Drug Delivery System (ADD(APD))	14	0	0	0	14
Automated Drug Delivery System EMS (ADE)	0	0	0	0	0
Automated Patient Dispensing System 340B Clinic (ADC)	0	0	0	0	0
Centralized Hospital Packaging Government Owned (CHE)	0	0	0	0	0
Centralized Hospital Packaging (CHP)	0	0	0	0	0
Clinics (CLN)	7	14	0	0	21
Clinics Government Owned (CLE)	19	11	0	0	30
Drug Room (DRM)	0	0	0	0	0
Drug Room Government Owned (DRE)	0	0	0	0	0
Hospitals (HSP)	1	1	0	0	2
Hospitals Government Owned (HPE)	0	1	0	0	1
Hospital Satellite Sterile Compounding (SCP)	0	0	0	0	0
Hospital Satellite Sterile Compounding Government Owned (SCE)	0	0	0	0	0
Hypodermic Needle and Syringes (HYP)	1	0	0	0	1
Correctional Pharmacy (LCF)	0	0	0	0	0
Outsourcing Facility (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident (NSF)	0	0	0	0	0
Pharmacy (PHY)	25	20	0	0	45
Pharmacy Government Owned (PHE)	1	1	0	0	2
Remote Dispensing Pharmacy (PHR)	0	0	0	0	1
Pharmacy Nonresident (NRP)	9	6	0	0	15
Sterile Compounding (LSC)	14	6	0	0	20
Sterile Compounding Government Owned (LSE)	2	2	0	0	4
Sterile Compounding Nonresident (NSC)	0	0	0	0	0
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	2	0	0	0	2
Third-Party Logistics Providers Nonresident (NPL)	1	2	0	0	3
Veterinary Food-Animal Drug Retailer (VET)	0	0	0	0	0
Wholesalers (WLS)	8	3	0	0	11
Wholesalers Government Owned (WLE)	0	1	0	0	1
Wholesalers Nonresident (OSD)	15	1	0	0	16
<b>Total</b>	<b>161</b>	<b>106</b>	<b>0</b>	<b>0</b>	<b>268</b>

<b>Site Temporary Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Drug Room -Temp (DRM)	1	0	0	0	1
Hospitals - Temp (HSP)	3	19	0	0	22
Hospital Satellite Sterile Compounding - Temp (SCP)	0	0	0	0	0
Outsourcing Facility - Temp (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident - Temp (NSF)	0	0	0	0	0
Pharmacy - Temp (PHY)	61	34	0	0	95
Remote Dispensing Pharmacy - Temp (PHR)	0	0	0	0	0
Pharmacy Nonresident - Temp (NRP)	15	16	0	0	31
Sterile Compounding - Temp (LSC)	6	20	0	0	26
Sterile Compounding Nonresident - Temp (NSC)	0	1	0	0	1
Third-Party Logistics Providers - Temp (TPL)	1	0	0	0	1
Third-Party Logistics Providers Nonresident - Temp (NPL)	4	2	0	0	6
Veterinary Food-Animal Drug Retailer - Temp (VET)	0	0	0	0	0
Wholesalers - Temp (WLS)	3	4	0	0	7
Wholesalers Nonresident - Temp (OSD)	10	12	0	0	22
<b>Total</b>	<b>104</b>	<b>108</b>	<b>0</b>	<b>0</b>	<b>212</b>

**PENDING APPLICATIONS (Data reflects number of pending applications at the end of the quarter)**

<b>Individual Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>
Designated Representatives (EXC)	220	266		
Designated Representatives Vet (EXV)	10	9		
Designated Representatives-3PL (DRL)	52	68		
Designated Representatives-Reverse Distributor (DRR)	2	0		
Designated Paramedic (DPM)	0	1		
Intern Pharmacist (INT)	233	123		
Pharmacist (exam not eligible)	1,643	1,596		
Pharmacist (exam eligible)	1,253	898		
Advanced Practice Pharmacist (APH)	151	106		
Pharmacy Technician (TCH)	1,732	812		
<b>Total</b>	<b>5,296</b>	<b>3,879</b>	<b>0</b>	<b>5,908</b>

<b>Site Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>
Automated Drug Delivery System (ADD(AUD))	140	123		
Automated Drug Delivery System (ADD(APD))	49	54		
Automated Drug Delivery System EMS (ADE)	0	0		
Automated Patient Dispensing System 340B Clinic (ADC)	0	2		
Centralized Hospital Packaging Government Owned (CHE)	1	1		
Centralized Hospital Packaging (CHP)	4	4		
Clinics (CLN)	133	133		
Clinics Government Owned (CLE)	30	26		
Drug Room (DRM)	4	3		
Drug Room Government Owned (DRE)	0	0		
Hospitals (HSP)	25	7		
Hospitals Government Owned (HPE)	2	1		
Hospital Satellite Sterile Compounding (SCP)	2	2		
Hospital Satellite Sterile Compounding Government Owned (SCE)	2	2		
Hypodermic Needle and Syringes (HYP)	14	13		
Correctional Pharmacy (LCF)	0	0		
Outsourcing Facility (OSF)	0	0		
Outsourcing Facility Nonresident (NSF)	8	9		
Pharmacy (PHY)	208	293		
Pharmacy Government Owned (PHE)	13	11		
Remote Dispensing Pharmacy (PHR)	5	5		
Pharmacy Nonresident (NRP)	164	184		
Sterile Compounding (LSC)	82	61		
Sterile Compounding - Government Owned (LSE)	10	9		
Sterile Compounding Nonresident (NSC)	15	17		
Surplus Medication Collection Distribution Intermediary (SME)	0	0		
Third-Party Logistics Providers (TPL)	2	2		
Third-Party Logistics Providers Nonresident (NPL)	62	66		
Veterinary Food-Animal Drug Retailer (VET)	1	1		
Wholesalers (WLS)	49	46		
Wholesalers Government Owned (WLE)	2	1		
Wholesalers Nonresident (OSD)	127	133		
<b>Total</b>	<b>1,014</b>	<b>1,086</b>	<b>0</b>	<b>1,094</b>

<b>Applications Pending with Temporary Licenses Issued - Pending Full License</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>
Drug Room -Temp (DRM)	3	2		
Hospitals - Temp (HSP)	11	29		
Hospital Satellite Sterile Compounding - Temp (SCP)	0	0		
Outsourcing Facility - Temp (OSF)	0	0		
Outsourcing Facility Nonresident - Temp (NSF)	2	0		
Pharmacy - Temp (PHY)	114	84		
Remote Dispensing Pharmacy - Temp (PHR)	0	0		
Pharmacy Nonresident - Temp (NRP)	43	29		
Sterile Compounding - Temp (LSC)	18	36		
Sterile Compounding Nonresident - Temp (NSC)	1	1		
Third-Party Logistics Providers - Temp (TPL)	1	0		
Third-Party Logistics Providers Nonresident - Temp (NPL)	5	3		
Veterinary Food-Animal Drug Retailer - Temp (VET)	0	0		
Wholesalers - Temp (WLS)	3	3		
Wholesalers Nonresident - Temp (OSD)	10	16		
<b>Total</b>	<b>211</b>	<b>203</b>	<b>0</b>	<b>213</b>

**APPLICATIONS WITHDRAWN**

<b>Individual Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representatives (EXC)	3	0	0	0	3
Designated Representatives Vet (EXV)	0	0	0	0	0
Designated Representatives-3PL (DRL)	0	0	0	0	0
Designated Representatives-Reverse Distributor (DRR)	0	0	0	0	0
Designated Paramedic (DPM)	0	0	0	0	0
Intern Pharmacist (INT)	0	0	0	0	0
Pharmacist (exam applications)	3	1	0	0	4
Advanced Practice Pharmacist (APH)	0	0	0	0	0
Pharmacy Technician (TCH)	2	327	0	0	329
<b>Total</b>	<b>8</b>	<b>328</b>	<b>0</b>	<b>0</b>	<b>336</b>

<b>Site Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Automated Drug Delivery System (ADD(AUD))	8	3	0	0	11
Automated Drug Delivery System (ADD(APD))	0	0	0	0	0
Automated Drug Delivery System EMS (ADE)	0	0	0	0	0
Automated Patient Dispensing System 340B Clinic (ADC)	0	0	0	0	0
Centralized Hospital Packaging Government Owned (CHE)	0	0	0	0	0
Centralized Hospital Packaging (CHP)	0	0	0	0	0
Clinics (CLN)	2	0	0	0	2
Clinics Government Owned (CLE)	1	0	0	0	1
Drug Room (DRM)	0	0	0	0	0
Drug Room Government Owned (DRE)	0	0	0	0	0
Hospitals (HSP)	0	0	0	0	0
Hospitals Government Ownerd (HPE)	0	0	0	0	0
Hospital Satellite Sterile Compounding (SCP)	0	0	0	0	0
Hospital Satellite Sterile Compounding Government Owned (SCE)	0	0	0	0	0
Hypodermic Needle and Syringes (HYP)	0	0	0	0	0
Correctional Pharmacy (LCF)	0	0	0	0	0
Outsourcing Facility (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident (NSF)	1	0	0	0	1
Pharmacy (PHY)	3	0	0	0	3
Pharmacy Government Owned (PHE)	0	0	0	0	0
Remote Dispensing Pharmacy (PHR)	0	0	0	0	0
Pharmacy Nonresident (NRP)	3	1	0	0	4
Sterile Compounding (LSC)	3	0	0	0	3
Sterile Compounding - Government Owned (LSE)	1	0	0	0	1
Sterile Compounding Nonresident (NSC)	2	0	0	0	2
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	0	0	0	0	0
Third-Party Logistics Providers Nonresident (NPL)	0	0	0	0	0
Veterinary Food-Animal Drug Retailer (VET)	0	0	0	0	0
Wholesalers (WLS)	0	0	0	0	0
Wholesalers Government Owned (WLE)	0	0	0	0	0
Wholesalers Nonresident (OSD)	2	0	0	0	2
<b>Total</b>	<b>18</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>19</b>

**APPLICATIONS DENIED**

<b>Individual Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representatives (EXC)	0	0	0	0	0
Designated Representatives Vet (EXV)	0	0	0	0	0
Designated Representatives-3PL (DRL)	0	0	0	0	0
Designated Representatives-Reverse Distributor (DRR)	0	0	0	0	0
Designated Paramedic (DPM)	0	0	0	0	0
Intern Pharmacist (INT)	0	0	0	0	0
Pharmacist (exam application)	2	2	0	0	4
Pharmacist (exam eligible)	0	0	0	0	0
Advanced Practice Pharmacist (APH)	0	0	0	0	0
Pharmacy Technician (TCH)	6	6	0	0	12
<b>Total</b>	<b>8</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>16</b>

<b>Site Applications</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Centralized Hospital Packaging Government Owned (CHE)	0	0	0	0	0
Centralized Hospital Packaging (CHP)	0	0	0	0	0
Clinics (CLN)	0	0	0	0	0
Clinics Government Owned (CLE)	0	0	0	0	0
Drug Room (DRM)	0	0	0	0	0
Drug Room Government Owned (DRE)	0	0	0	0	0
Hospitals (HSP)	0	0	0	0	0
Hospitals Government Owned (HPE)	0	0	0	0	0
Hospital Satellite Sterile Compounding (SCP)	0	0	0	0	0
Hospital Satellite Sterile Compounding Government Owned (SCE)	0	0	0	0	0
Hypodermic Needle and Syringes (HYP)	0	0	0	0	0
Correctional Pharmacy (LCF)	0	0	0	0	0
Outsourcing Facility (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident (NSF)	1	0	0	0	1
Pharmacy (PHY)	4	1	0	0	5
Pharmacy Government Owned (PHE)	0	0	0	0	0
Remote Dispensing Pharmacy (PHR)	0	0	0	0	0
Pharmacy Nonresident (NRP)	1	1	0	0	2
Sterile Compounding (LSC)	0	0	0	0	0
Sterile Compounding Government Owned (LSE)	0	0	0	0	0
Sterile Compounding Nonresident (NSC)	2	0	0	0	2
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	0	0	0	0	0
Third-Party Logistics Providers Nonresident (NPL)	0	0	0	0	0
Veterinary Food-Animal Drug Retailer (VET)	0	0	0	0	0
Wholesalers (WLS)	0	1	0	0	1
Wholesalers Government Owned (WLE)	0	0	0	0	0
Wholesalers Nonresident (OSD)	0	0	0	0	0
<b>Total</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>11</b>



**RESPOND TO STATUS INQUIRIES**

<b>Email Inquiries</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representative Received	485	386	0	0	871
Designated Representative Responded	338	139	0	0	477
Advanced Practice Pharmacist Received	205	205	0	0	410
Advanced Practice Pharmacist Responded	156	157	0	0	313
Pharmacist/Intern Received	1,928	1,335	0	0	3,263
Pharmacist/Intern Responded	1,076	1,132	0	0	2,208
Pharmacy Technician Received	1,978	1,386	0	0	3,364
Pharmacy Technician Responded	1,978	2,057	0	0	4,035
Pharmacy Received	1,903	1,976	0	0	3,879
Pharmacy Responded	1,195	1,171	0	0	2,366
Sterile Compounding/Outsourcing Received	914	1,462	0	0	2,376
Sterile Compounding/Outsourcing Responded	737	468	0	0	1,205
Wholesale/Clinic/Hypodermic/3PL Received	769	495	0	0	1,264
Wholesale/Clinic/Hypodermic/3PL Responded	352	68	0	0	420
Automated Drug Delivery Systems Received	310	349	0	0	659
Automated Drug Delivery Systems Responded	245	284	0	0	529
Pharmacist-in-Charge Received	920	965	0	0	1,885
Pharmacist-in-Charge Responded	774	700	0	0	1,474
Change of Permit Received	816	948	0	0	1,764
Change of Permit Responded	592	624	0	0	1,216
Renewals Received	2,141	2,311	0	0	4,452
Renewals Responded	1,970	2,056	0	0	4,026

<b>Telephone Calls Received</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representative	42	72	0	0	114
Advanced Practice Pharmacist	112	92	0	0	204
Pharmacist/Intern	1,030	740	0	0	1,770
Pharmacy	44	631	0	0	675
Sterile Compounding/Outsourcing	88	0	0	0	88
Wholesale/Clinic/Hypodermic/3PL	83	72	0	0	155
Automated Drug Delivery Systems	222	215	0	0	437
Pharmacist-in-Charge	103	139	0	0	242
Change of Permit	76	67	0	0	143
Renewals	1,246	1,223	0	0	2,469
Reception	19,930	15,197	0	0	35,127

**UPDATE LICENSING RECORDS**

<b>Change of Pharmacist-in-Charge</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	556	644	0	0	1,200
Processed	550	662	0	0	1,212
Approved	500	681	0	0	1,181
Pending (Data reflects number of pending at the end of the quarter.)	386	341			n/a
<b>Change of Designated Representative-in-Charge</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	44	34	0	0	78
Processed	38	37	0	0	75
Approved	38	45	0	0	83
Pending (Data reflects number of pending at the end of the quarter.)	70	58			n/a
<b>Change of Responsible Manager</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	5	7	0	0	12
Processed	4	7	0	0	11
Approved	5	8	0	0	13
Pending (Data reflects number of pending at the end of the quarter.)	7	6			n/a
<b>Change of Professional Director</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	18	31	0	0	49
Processed	15	32	0	0	47
Approved	66	27	0	0	93
Pending (Data reflects number of pending at the end of the quarter.)	61	61			n/a
<b>Change of Permits</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	658	333	0	0	991
Processed	66	276	0	0	342
Approved	50	193	0	0	243
Pending (Data reflects number of pending at the end of the quarter.)	2,415	2,555			n/a
<b>Clinic Co-Location</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	0	0	0	0	0
Processed	0	0	0	0	0
Approved	0	0	0	0	0
Pending (Data reflects number of pending at the end of the quarter.)	0	0	0	0	n/a
<b>Discontinuance of Business</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	112	109	0	0	221
Processed	115	95	0	0	210
Approved	109	69	0	0	178
Pending (Data reflects number of pending at the end of the quarter.)	321	363			n/a
<b>Intern Pharmacist Extensions</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Received	55	20	0	0	75
Processed	29	39	0	0	68
Completed	29	41	0	0	70
Pending (Data reflects number of pending at the end of the quarter.)	48	21			n/a
<b>Requests Approved</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Address/Name Changes	3,267	2,798	0	0	6,065
Off-site Storage	12	43	0	0	55
Transfer of Intern Hours	4	5	0	0	9
License Verification	214	133	0	0	347

**DISCONTINUED OF BUSINESS**

discontinued by date of closure

<b>Site Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Automated Drug Delivery System (ADD(AUD))	20	12	0	0	32
Automated Drug Delivery System (ADD(APD))	3	0	0	0	3
Automated Drug Delivery System EMS (ADE)	0	0	0	0	0
Automated Patient Dispensing System 340B Clinic (ADC)	0	0	0	0	0
Centralized Hospital Packaging Government Owned (CHE)	0	0	0	0	0
Centralized Hospital Packaging (CHP)	0	0	0	0	0
Clinics (CLN)	2	1	0	0	3
Clinics Government Owned (CLE)	11	14	0	0	25
Drug Room (DRM)	0	0	0	0	0
Drug Room Government Owned (DRE)	0	0	0	0	0
Hospitals (HSP)	0	2	0	0	2
Hospitals Government Owned (HPE)	0	0	0	0	0
Hospital Satellite Sterile Compounding (SCP)	0	0	0	0	0
Hospital Satellite Sterile Compounding Government Owned (SCE)	0	0	0	0	0
Hypodermic Needle and Syringes (HYP)	0	0	0	0	0
Correctional Pharmacy (LCF)	1	0	0	0	1
Outsourcing Facility (OSF)	0	0	0	0	0
Outsourcing Facility Nonresident (NSF)	1	0	0	0	1
Pharmacy (PHY)	24	26	0	0	50
Pharmacy (PHY) Chain	9	12	0	0	21
Pharmacy Government Owned (PHE)	1	0	0	0	1
Remote Dispensing Pharmacy (PHR)	0	0	0	0	0
Pharmacy Nonresident (NRP)	3	2	0	0	5
Sterile Compounding (LSC)	13	5	0	0	18
Sterile Compounding Government Owned (LSE)	5	0	0	0	5
Sterile Compounding Nonresident (NSC)	0	2	0	0	2
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	0	0	0	0	0
Third-Party Logistics Providers Nonresident (NPL)	0	1	0	0	1
Veterinary Food-Animal Drug Retailer (VET)	0	0	0	0	0
Wholesalers (WLS)	5	3	0	0	8
Wholesalers Government Owned (WLE)	0	0	0	0	0
Wholesalers Nonresident (OSD)	3	4	0	0	7
<b>Total</b>	<b>81</b>	<b>72</b>	<b>0</b>	<b>0</b>	<b>153</b>

**LICENSES RENEWED**

<b>Individual Licenses Renewed</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Designated Representatives (EXC)	581	610	0	0	1,191
Designated Representatives Vet (EXV)	16	8	0	0	24
Designated Representatives-3PL (DRL)	94	87	0	0	181
Designated Representatives-Reverse Distributor (DRR)	1	0	0	0	1
Designated Paramedic (DPM)	2	0	0	0	2
Pharmacist (RPH)	6,119	5,835	0	0	11,954
Advanced Practice Pharmacist (APH)	112	103	0	0	215
Pharmacy Technician (TCH)	7,511	6,987	0	0	14,498
<b>Total</b>	<b>14,436</b>	<b>13,630</b>	<b>0</b>	<b>0</b>	<b>28,066</b>

<b>Site Licenses Renewed</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>	<b>Total FYTD</b>
Automated Drug Delivery System (ADD)	148	639	0	0	787
Automated Drug Delivery System EMS (ADE)	0	0	0	0	0
Automated Patient Dispensing System 340B Clinic (ADC)	0	0	0	0	0
Centralized Hospital Packaging Government Owned (CHE)	1	0	0	0	1
Centralized Hospital Packaging (CHP)	3	1	0	0	4
Clinics (CLN)	403	253	0	0	656
Clinics Government Owned (CLE)	7	819	0	0	826
Drug Room (DRM)	3	4	0	0	7
Drug Room Government Owned (DRE)	1	9	0	0	10
Hospitals (HSP)	74	148	0	0	222
Hospitals Government Owned (HPE)	39	22	0	0	61
Hospital Satellite Sterile Compounding (SCP)	2	1	0	0	3
Hospital Satellite Sterile Compounding Government Owned (SCE)	1	0	0	0	1
Hypodermic Needle and Syringes (HYP)	76	40	0	0	116
Correctional Pharmacy (LCF)	0	57	0	0	57
Outsourcing Facility (OSF)	2	2	0	0	4
Outsourcing Facility Nonresident (NSF)	2	7	0	0	9
Pharmacy (PHY)	1,205	2,002	0	0	3,207
Pharmacy Government Owned (PHE)	25	85	0	0	110
Remote Dispensing Pharmacy (PHR)	0	1	0	0	1
Pharmacy Nonresident (NRP)	81	150	0	0	231
Sterile Compounding (LSC)	138	263	0	0	401
Sterile Compounding Government Owned (LSE)	65	3	0	0	68
Sterile Compounding Nonresident (NSC)	9	16	0	0	25
Surplus Medication Collection Distribution Intermediary (SME)	0	0	0	0	0
Third-Party Logistics Providers (TPL)	10	3	0	0	13
Third-Party Logistics Providers Nonresident (NPL)	33	26	0	0	59
Veterinary Food-Animal Drug Retailer (VET)	3	3	0	0	6
Wholesalers (WLS)	138	103	0	0	241
Wholesalers Government Owned (WLE)	1	7	0	0	8
Wholesalers Nonresident (OSD)	200	176	0	0	376
<b>Total</b>	<b>2,670</b>	<b>4,840</b>	<b>0</b>	<b>0</b>	<b>7,510</b>

**CURRENT LICENSES - Data reflects number of licenses at the end of the quarter.**

<b>Individual Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>
Designated Representatives (EXC)	2,879	2,835		
Designated Representatives Vet (EXV)	57	56		
Designated Representatives-3PL (DRL)	402	387		
Designated Representatives-Reverse Distributor (DRR)	7	9		
Designated Paramedic (DPM)	30	3		
Intern Pharmacist (INT)	6,257	6,054		
Pharmacist (RPH)	49,081	49,196		
Advanced Practice Pharmacist (APH)	912	987		
Pharmacy Technician (TCH)	68,382	68,733		
<b>Total</b>	<b>128,007</b>	<b>128,260</b>	<b>0</b>	<b>0</b>

<b>Site Licenses</b>	<b>July - Sept</b>	<b>Oct-Dec</b>	<b>Jan-Mar</b>	<b>Apr-Jun</b>
Automated Drug Delivery System (ADD(AUD))	879	888		
Automated Drug Delivery System (ADD(APD))	62	60		
Automated Drug Delivery System EMS (ADE)	1	1		
Automated Patient Dispensing System 340B Clinic (ADC)	0	0		
Centralized Hospital Packaging Government Owned (CHE)	2	2		
Centralized Hospital Packaging (CHP)	8	8		
Clinics (CLN)	1,326	1,339		
Clinics Government Owned (CLE)	912	906		
Drug Room (DRM)	23	22		
Drug Room Government Owned (DRE)	10	10		
Hospitals (HSP)	396	411		
Hospitals Government Owned (HPE)	78	79		
Hospital Satellite Sterile Compounding (SCP)	4	4		
Hospital Satellite Sterile Compounding Government Owned (SCE)	2	2		
Hypodermic Needle and Syringes (HYP)	302	302		
Correctional Pharmacy (LCF)	59	59		
Outsourcing Facility (OSF)	4	4		
Outsourcing Facility Nonresident (NSF)	25	22		
Pharmacy (PHY)	6,369	6,366		
Pharmacy Government Owned (PHE)	138	139		
Remote Dispensing Pharmacy (PHR)	2	2		
Pharmacy Nonresident (NRP)	612	625		
Sterile Compounding (LSC)	744	761		
Sterile Compounding Government Owned (LSE)	107	103		
Sterile Compounding Nonresident (NSC)	63	63		
Surplus Medication Collection Distribution Intermediary (SME)	1	1		
Third-Party Logistics Providers (TPL)	38	38		
Third-Party Logistics Providers Nonresident (NPL)	106	110		
Veterinary Food-Animal Drug Retailer (VET)	20	20		
Wholesalers (WLS)	550	555		
Wholesalers Government Owned (WLE)	13	13		
Wholesalers Nonresident (OSD)	845	852		
<b>Total</b>	<b>12,822</b>	<b>12,879</b>	<b>0</b>	<b>0</b>
<b>Total Population of Licenses</b>	<b>140,829</b>	<b>141,139</b>	<b>0</b>	<b>0</b>