



# **Texas State Board of Pharmacy**

## **Annual Report**

### **Fiscal Year 2019**

**Dennis Wiesner, R.Ph.**  
President

**Allison Vordenbaumen Benz, R.Ph, M.S.**  
Executive Director/Secretary

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## Board Members

Dennis Wiesner, R.Ph.  
President  
Austin  
6/1/2018 – 08/31/2019

Bradley A. Miller, Ph.T.R.  
Vice President  
Austin  
9/23/2013 – 8/31/2019

Donnie Lewis, R.Ph.  
Treasurer  
Athens  
06/1/2018 - 8/31/2019

L. Susan Kedron  
Public Member  
Dallas  
5/9/2008 – 8/31/2019

Chip Thornsburg  
Public Member  
San Antonio  
10/6/2015 – 8/31/2021

Suzette Tijerina, R.Ph.  
Castle Hills  
10/6/2015 – 8/31/2021

Jenny Downing Yoakum, R.Ph  
Longview  
10/6/2015 – 8/31/2021

Rick Fernandez, R.Ph.  
Northlake  
6/1/2018 - 8/31/2023

Daniel Guerrero  
Public Member  
San Marcos  
6/1/2018 – 8/31/2023

Lori Henke, Pharm.D.  
Amarillo  
06/01/2018 – 08/31/2023

Julie Spier, R.Ph.  
Katy  
6/1/2018 – 08/31/2023

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## Office of the Executive Director

### **Executive Director**

Allison Vordenbaumen Benz, R.Ph., M.S.

### **Chief Compliance Officer**

Ben Santana, R.Ph.

### **Senior Compliance Officer**

Iona Grant, R.Ph.

### **Compliance Officer**

Terri Burrows, R.Ph., Pharm.D.

Kathy Salinas, R.Ph.

James Clark, R.Ph.

### **Compliance Program Officer**

Tera McConnell, R.Ph., Pharm.D.

Synthia Hill, R.Ph., Pharm.D.

### **Senior Compliance Inspector**

Adrienne Bauer, Ph.T.R.

### **Compliance Inspector**

Keya Henry, Ph.T.R.

Javier Ledesma, Ph.T.R.

Kimberly Miles, Ph.T.R.

Jennifer Trook, Ph.T.R.

Felicia Carrasco, Ph.T.R.

Robert Moura, Ph.T.R.

Kendra O'Neel, Ph.T.R.

### **Senior Compliance Specialist**

Jessica Rodriguez-Reyes, Ph.T.R.

### **Compliance Specialist**

Gracie Lara, Ph.T.R.

Noreen Gomez

### **Executive Assistant**

Margarita Zamarripa

### **Receptionist**

Vacant

### **Information Resources Manager**

Brian Hurdle

### **Support Systems Specialist**

Todd Hayek

### **Information Technology Security Analyst**

Matthew Hays

### **Systems Administrator**

Devin Wilson

### **Prescription Monitoring Program Manager**

Bj Slack

### **Program Specialist III**

Mary Newman, Ph.T.R.

Sofia Bishop

Linda Yazdanshenas

### **Administrative Assistant V**

Lori Gonzales, Ph.T.R.

Veronica Guzman

Barbara Racca, Ph.T.R.

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## Administrative Services & Licensing

### **Assistant General Counsel for Legislation and Administration**

Annette Graves, J.D.

### **Financial Services Manager**

Vacant

**Accountant III**  
J. Raul Pacheco

**Accountant II**  
Chantell Solomon

**Accountant I**  
Taylor King

**Purchaser**  
David Hardy

**Staff Services Officer II**  
Robbi Dana

**Staff Services Officer I**  
Vacant

**Licensing Manager**  
Misty Anderson

**Licensing Specialist**  
Rachel Glass  
Melinda Uballe  
Lisa Ake  
Tammy Baker, Ph.T.R.  
Sarah Moody, Ph.T.R.  
Audric Fowler, Ph.T.R.  
Lisa Wells, Ph.T.R.  
Crystal Belvin-Scott, Ph.T.R.  
Marcus Holliday, Ph.T.R.  
Vacant

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## Enforcement

**Division Director**  
Caroline Hotchkiss, J.D.

**Chief Investigator**  
Rolando Belmares

**Investigator (7)**  
Vacant (1)

**Senior Staff Investigator**  
Vacant

**Investigative Case Manager**  
Cynthia Fazin

**Enforcement Program Manager**  
Robert Rivera, Ph.T.R.

**Compliance Analyst**  
David Meryman, Ph.T.R.

**Enforcement Program Administrator**  
Nelma Sanchez, Ph.T.R.

**Enforcement Program Officer**  
Brandy Plummer

**Enforcement Officer**  
Briana Velasquez, Ph.T.R.  
Heather Torres, Ph.T.R.  
Vacant

**Enforcement Program Specialist**  
Debra Beall

**Enforcement Specialist**  
Lily Moreno  
Carissa Garcia, Ph.T.R.  
Misty Plant, Ph.T.R.  
Marisa Sanchez, Ph.T.R.  
Angela Castillo, Ph.T.R.  
Heather Hernandez, Ph.T.R.  
Janelle Urbanus, Ph.T.R.  
Wesley Moody, Ph.T.R.  
Vacant (2)

**Enforcement Technician**  
Irene Zapata  
Senia Perez, Ph.T.R.  
Vacant

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## Legal

### **General Counsel**

Kerstin Arnold, J.D.

### **Assistant General Counsel**

Megan Holloway, J.D.

### **Litigation Counsel**

John Griffith, J.D.

### **Staff Attorney**

Mary Martha Murphy, J.D.

Eamon Briggs, J.D.

Mary Moretti, J.D.

### **Legal Assistant Team Manager**

Ann Driscoll, Ph.T.R.

### **Legal Assistant**

Tabatha Lowden

Kelly Clark

Amanda Debs, Ph.T.R.

Jessica Hirn

Amy Burt, Ph.T.R.

Christine Pavalasky

Vacant

### **Senior Administrative Assistant**

Sandra Chatham

Hollie Evans, Ph.T.R.

### **Outreach Coordinator**

Shayda Bakhshi



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## **Board Mission**

The statutory mission of the Texas State Board of Pharmacy is to promote, preserve, and protect the public health, safety, and welfare by fostering the provision of quality pharmaceutical care to the citizens of Texas, through the regulation of: the practice of pharmacy; the operation of pharmacies; and the distribution of prescription drugs in the public interest.

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## **Board Philosophy**

The Texas State Board of Pharmacy will assume a leadership role in regulating the practice of pharmacy and act in accordance with the highest standards of ethics, accountability, efficiency, effectiveness, and open communication. We affirm that regulation of the practice of pharmacy is a public and private trust. We approach our mission with a deep sense of purpose and responsibility. The public and regulated community alike can be assured of a balanced and sensible approach to regulation.

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## **Board Strategic Goals (FY2015-2019)**

- We will establish and implement reasonable standards for pharmacist and pharmacy technician education and practice, and for the operation of pharmacies to assure that safe and effective pharmaceutical care is delivered to the citizens of Texas (Sections 551-569 of the Texas Pharmacy Act, TEX. OCC. CODE ANN. Title 3, Subtitle J).
- We will assertively and swiftly enforce all laws relating to the practice of pharmacy to ensure that the public health and safety are protected from the following: incompetent pharmacists and pharmacy technicians; unprofessional conduct, fraud, and misrepresentation by licensees; and diversion of prescription drugs from pharmacies; and to promote positive patient outcomes through the following: reduction of medication errors by encouraging or requiring licensees to implement self-assessment programs and continuous quality improvement programs, including peer-review processes; and enforcement of rules relating to patient counseling and drug regimen review, including prevention of misuse and abuse of prescription drugs. [Sections 555-569 of the Texas Pharmacy Act, TEX. OCC. CODE ANN. Title 3, Subtitle J; Chapter 481 of the Texas Controlled Substances Act, TEX. HEALTH & SAFETY CODE ANN.; and Chapter 483 of the Texas Dangerous Drug Act, TEX. HEALTH & SAFETY CODE ANN.]
- We will establish and implement policies governing purchasing and public works contracting that foster meaningful and substantive inclusion of historically underutilized businesses (HUBs).

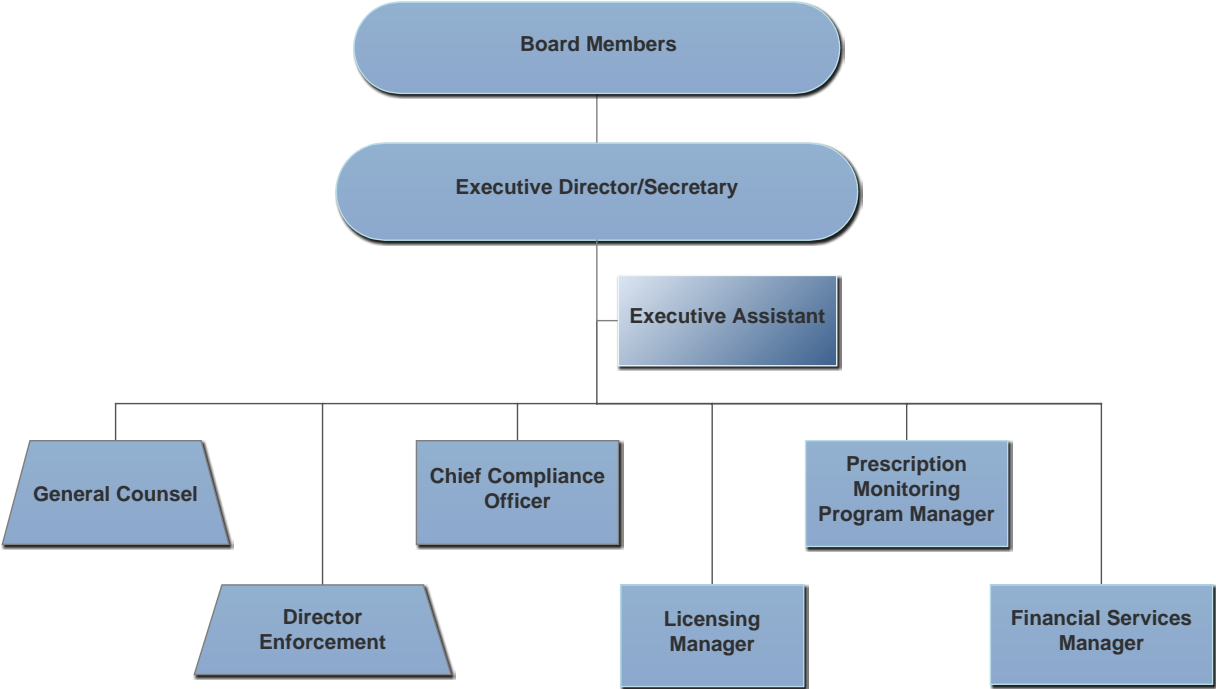
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## **Board Structure**

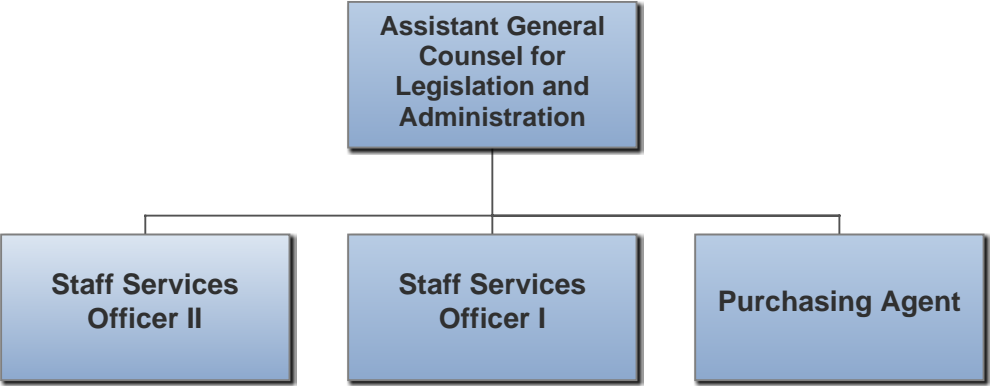
The Board's functional structure at the end of FY2019 was composed of the following:

- Office of the Executive Director;
- Administrative Services and Licensing;
- Compliance;
- Enforcement;
- Information Technology;
- Legal Services;
- Open Records and Rulemaking; and
- Prescription Monitoring Program.

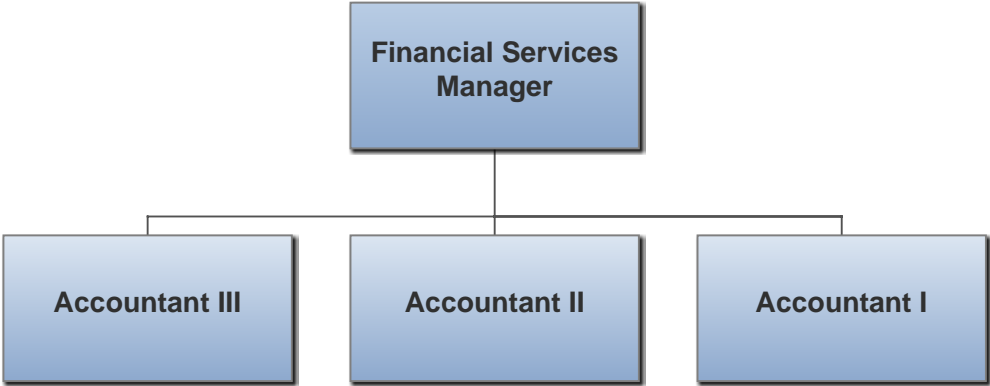
**Texas State Board of Pharmacy**



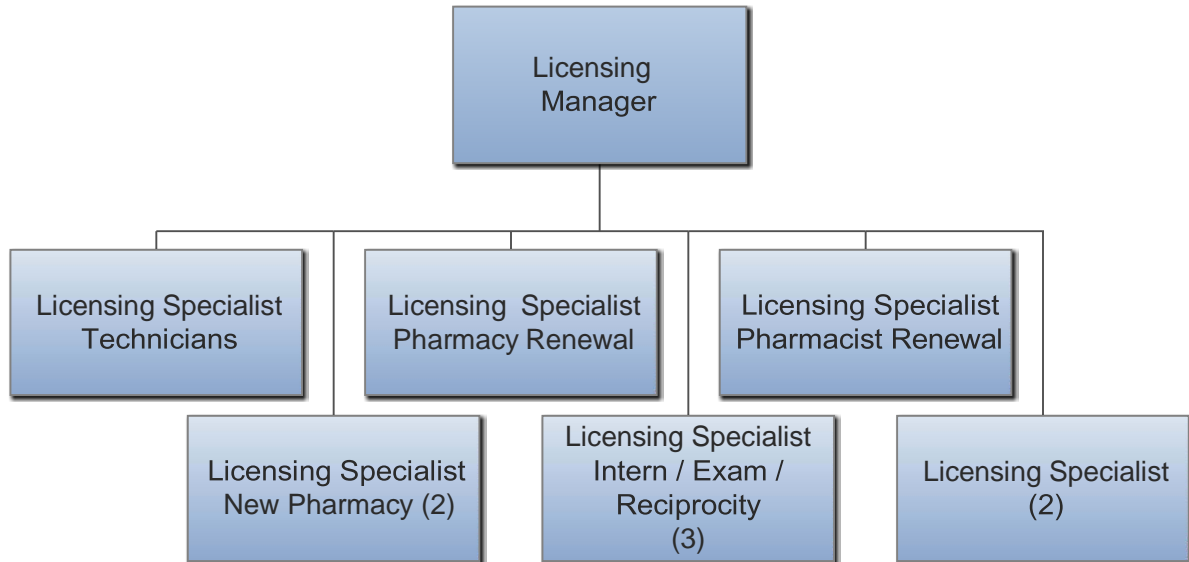
# Human Resources Teams



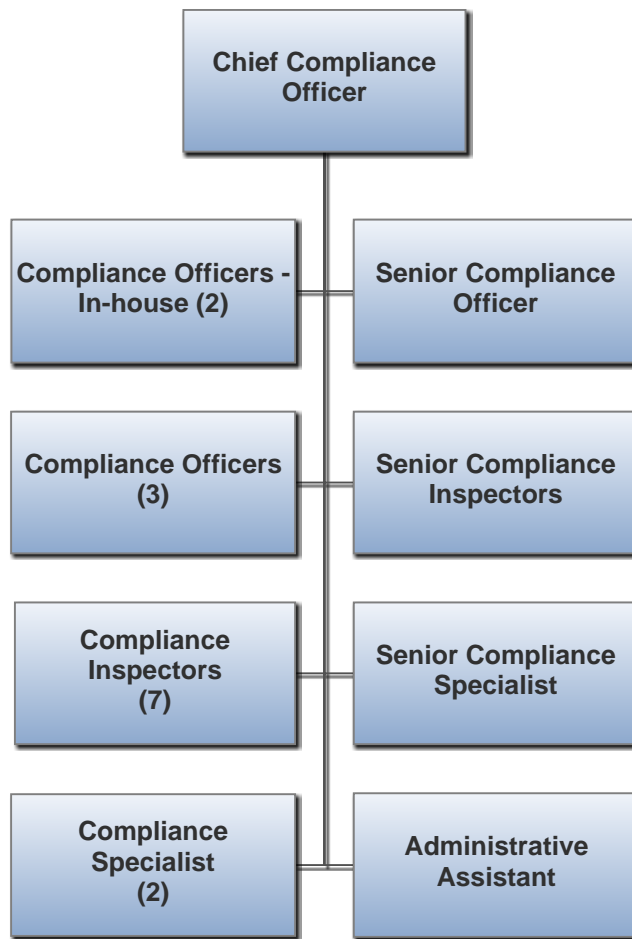
# Finance Team



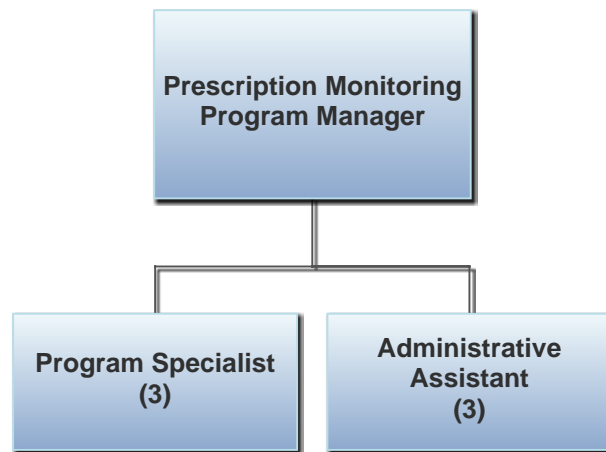
## Licensing Team



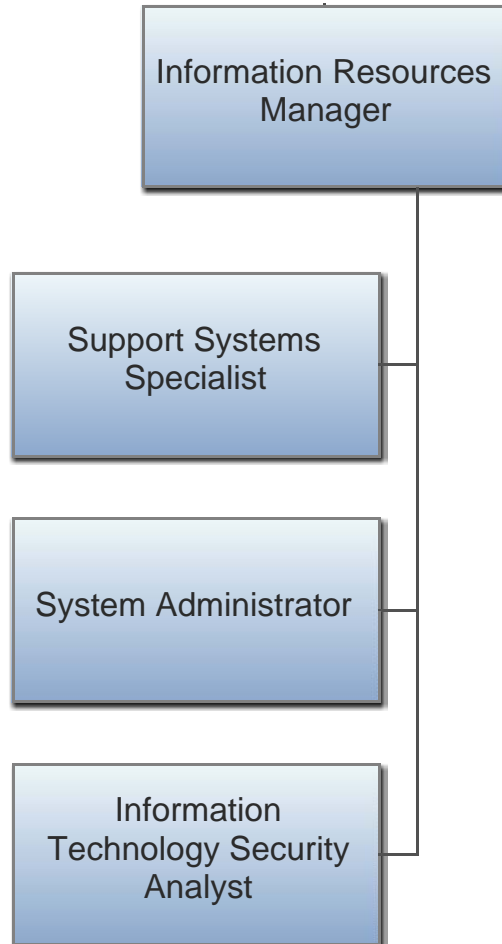
## Compliance Team



## **Prescription Monitoring Program Team**

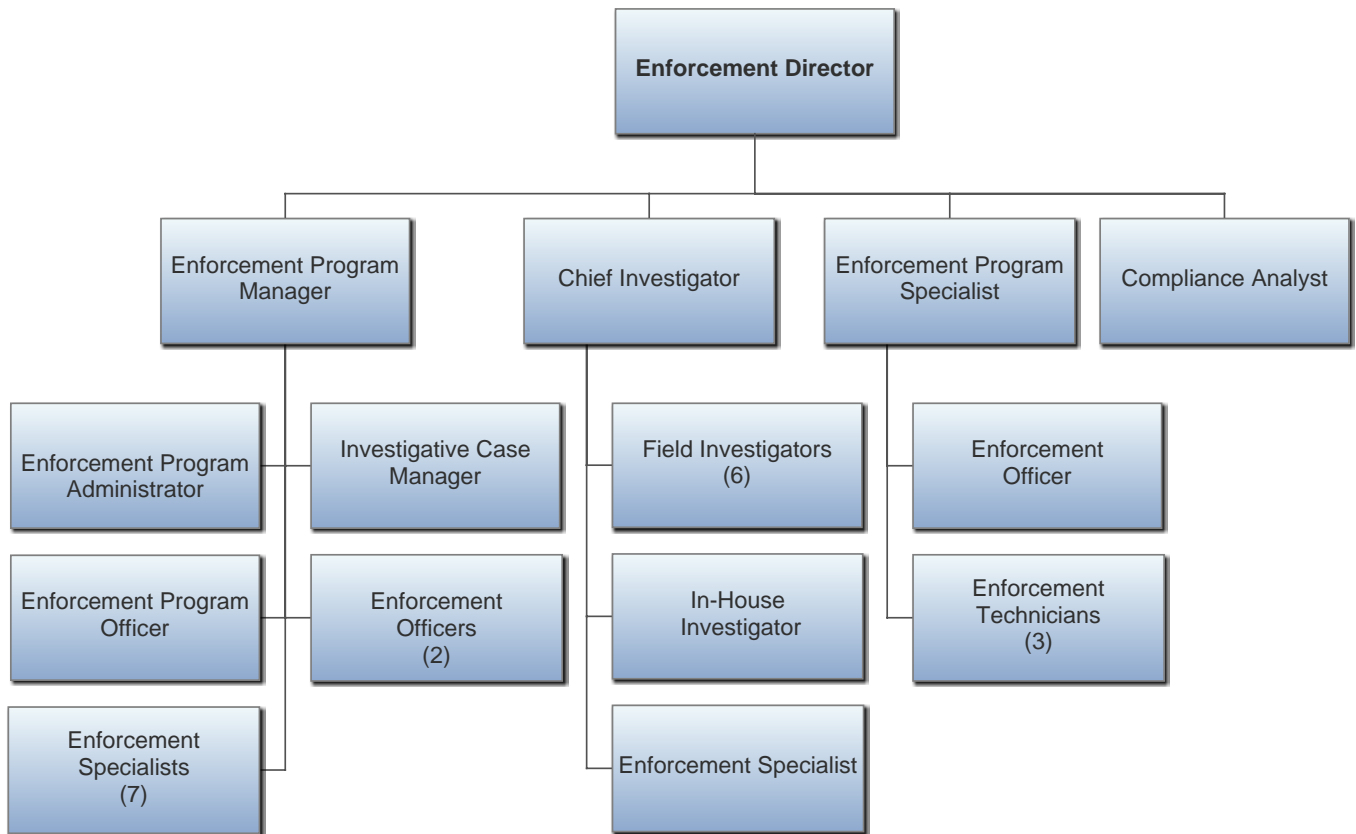


## Information Technology Team

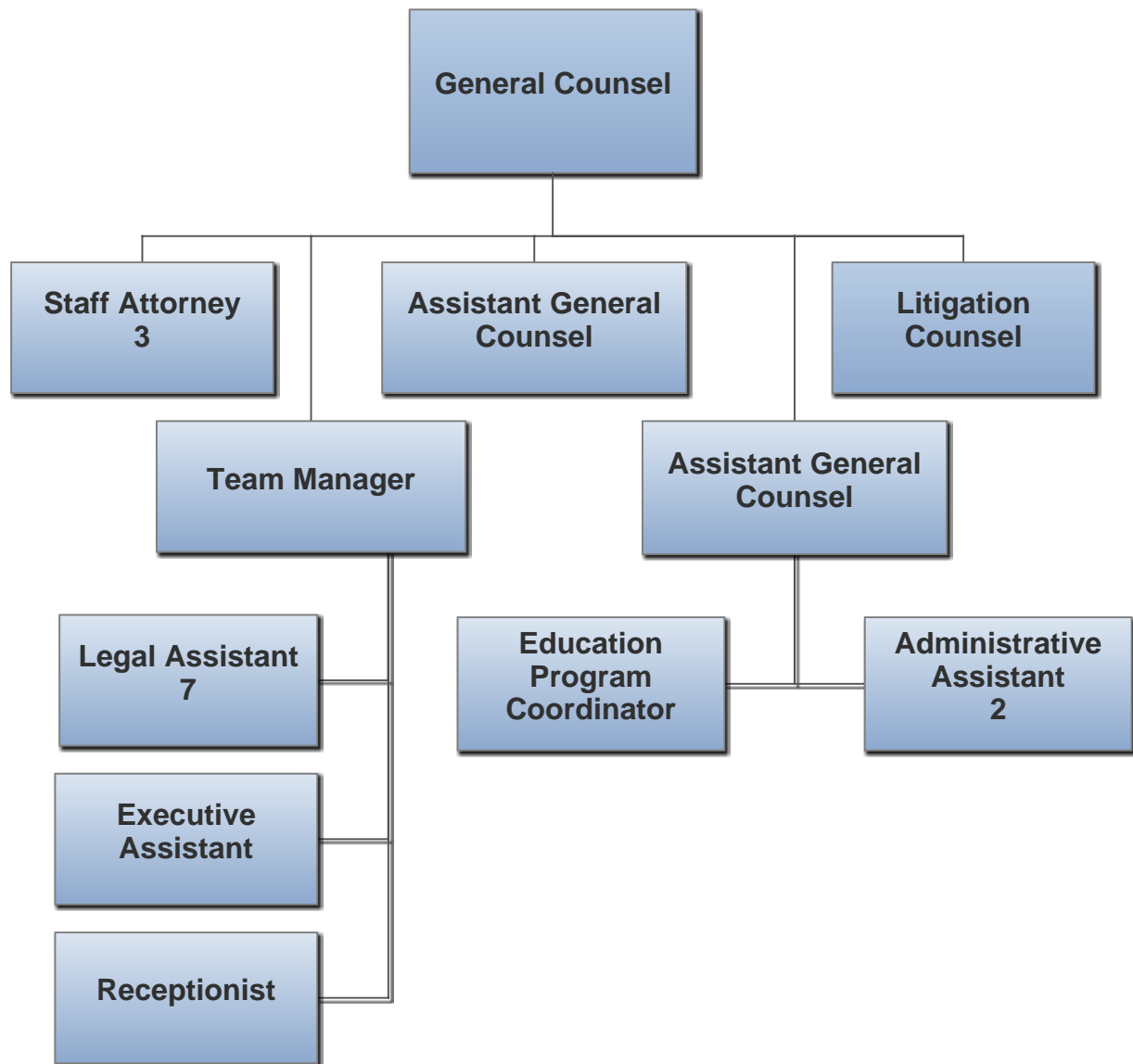




## Enforcement Team



## Legal Team



The attached report represents an unaudited report of the financial activities regarding the internal operating budget for Fiscal Year 2019 (September 1, 2018 - August 31, 2019). A more detailed accounting of the agency's unaudited financial report, which includes all fund types and account groups, a complete statement of revenues and expenditures, and changes in fund balance, can be found in the *"FY2019 Annual Financial Report,"* located on the Board's website.

As of August 31, 2019, the unexpended balance for FY2019 was approximately \$1,227,937 or 8% under budget. Approximately half of the unexpended balance for FY2019 was due to \$630,187.00 in unexpended funds in our supplemental budget appropriated by SB 500, 86<sup>th</sup> Regular Legislative Session.

## Texas State Board of Pharmacy

Fiscal Year 2019 - Appropriation Expenditures

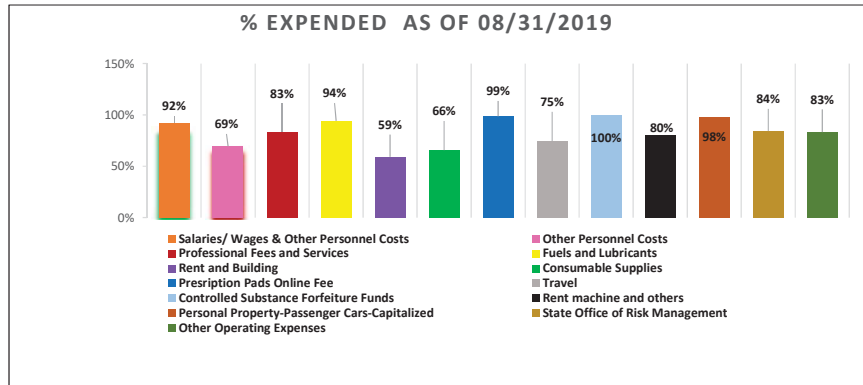
As Of August 31, 2019

(Based on 12 months actual data)

### Summary of Estimated Budget less YTD Expenditures

Item #		Estimated Operating Budget	Expenditures Paid Plus Est. Payables 9/1/18-08/31/19	Balance 8/31/2019	% Expended as of 08/31/2019
1	Salaries/ Wages & Other Personnel Costs	\$ 5,647,021	\$ (5,216,318)	\$ 430,703	92%
8	Other Personnel Costs	157,024	(109,039)	47,984	69%
2	Professional Fees and Services	7,183,231	(5,981,632)	1,412,657	83%
3	Fuels and Lubricants	28,000	(26,376)	1,624	94%
4	Rent and Building	5,300	(3,132)	2,168	59%
5	Consumable Supplies	35,511	(23,321)	12,190	66%
6	Prescription Pads Online Fee	1,943,844	(1,918,391)	(613,140)	99%
7	Travel	201,350	(150,130)	51,220	75%
9	Controlled Substance Forfeiture Funds	211,272	(211,272)	0	100%
10	Rent machine and others	28,145	(22,557)	5,588	80%
11	Personal Property-Passenger Cars-Capitalized	44,000	(43,198)	802	98%
12	State Office of Risk Management	8,076	(6,802)	1,274	84%
13	Other Operating Expenses	1,323,207	(1,103,014)	220,193	83%
<b>Totals</b>		<b>\$ 16,815,980</b>	<b>\$ (14,815,182)</b>	<b>\$ 1,227,937</b>	<b>92%</b>

\*Please see Pg 2 for further detail





TEXAS STATE BOARD OF PHARMACY  
Budget  
Fiscal Year 2019

OOE	COBJ	Description	BUDGET Sub Total	Budgeted	Expended	Remaining Budget	Expended percent
<b><u>SALARIES AND WAGES</u></b>							
1001	7001	Exempt Salaries		132,489.96	(132,489.96)	-	100%
1001	7002	Classified Salaries - Full Time		5,455,531.22	(5,028,767.68)	426,763.54	92%
1001	7004	Classified Non-Permanent F/T Employees		34,000.00	(31,576.10)	2,423.90	93%
1001	7021	Overtime Pay		25,000.00	(23,484.45)	1,515.55	94%
TOTALS:				5,647,021.18	(5,216,318.19)	430,702.99	92%
<b><u>OTHER PERSONNEL COSTS</u></b>							
1002	7022	Longevity		100,862.45	(56,405.98)	44,456.47	56%
1002	7023	Lump Sum Termination Payment		30,000.00	(27,142.93)	2,857.07	90%
1002	7017	One-Time Merit Increase		20,000.00	(19,329.41)	670.59	97%
9999	7050	Benefit Replacement Pay		6,161.16	(6,161.16)	-	100%
TOTALS:				157,023.61	(109,039.48)		69%
<b><u>PROFESIONAL FEES AND SERVICES</u></b>							
2001	Various	(a) Professional Fees & Svcs (Other)	792,650.48				
2001		(b) Professional Fees & Svcs (TPA-Peer Asst)	291,268.50	1,083,918.98	(512,506.87)	571,412.11	47%
2001	7275	Information Technology Services ( State Wide Integrating System)		6,099,312.00	(5,469,125.00)	630,187.00	90%
TOTALS:				7,183,230.98	(5,981,631.87)	1,201,599.11	83%
<b><u>FUELS AND LUBRICANTS</u></b>							
2002	7304	Gas, Other Fuels & Lubricants		28,000.00	(26,375.81)	1,624.19	94%
TOTALS:				28,000.00	(26,375.81)	1,624.19	94%
<b><u>CONSUMABLE SUPPLIES</u></b>							
2003	7300	Consumable Supplies & Materials		35,510.76	(23,320.80)	12,189.96	66%
TOTALS:				35,510.76	(23,320.80)	12,189.96	66%
<b><u>TRAVEL</u></b>							
2005	Various	Travel - Board Members (Service)	38,000.00				
2005	Various	Travel - Board Mbr Conference	15,000.00				
2005	Various	Travel - State Vehicle	668.78				
2005	Various	Travel - Staff (Service)	130,681.22				
2005	Various	Travel - Staff (Conference)	5,000.00				
2005	Various	Travel - Staff (Conf Out Of State)	12,000.00	201,350.00	(150,130.23)	51,219.77	75%
TOTALS:				201,350.00	(150,130.23)		75%
<b><u>RENT AND BUILDING</u></b>							
2006	7470	Rental of Space		5,300.00	(3,131.77)	2,168.23	59%
TOTALS:				5,300.00	(3,131.77)	2,168.23	59%
<b><u>RENT- MACHINE AND OTHERS</u></b>							
2007	7406	Rental of Furn & Equip		28,145.22	(22,556.88)	5,588.34	80%
TOTALS:				28,145.22	(22,556.88)	5,588.34	80%
<b><u>OTHER OPERATING EXPENSE</u></b>							
2009	7368	Vehicles - Maintenance		28,000.00	(26,973.39)	1,026.61	96%
2009	7291	Postage		67,552.37	(61,608.66)	5,943.71	91%
2009	7962	Telephone		54,734.17	(637.52)	54,096.65	1%
2009	7219	*Rx Drug Pad Online Convenience Fee		120,916.82	(120,916.82)	-	100%
2009	7219	*Texas Online Fee		233,894.00	(233,752.00)	142.00	100%
2009	7303	Subscriptions		9,294.00	-	9,294.00	0%
2009	7201	Membership Fees & Dues		3,611.00	(190.26)	3,420.74	5%
2009	7299	Administrative Support Service	67,000.00				
		Legislative Transfer Out to HPC			(330,029.00)		
2009	7299	HPC Shared Regulatory Database	330,029.00	397,029.00	(66,722.04)	277.96	17%
2009	7295	Criminal Investigative Expense		3,606.00	-		
2009	7286	Freight & Delivery Service		7,350.00	(681.14)	6,668.86	9%
2009	7262	Maint & Repair - Furn & Equip		39,401.24	(10,130.74)	29,270.50	26%
2009	7216	Bonds & Insurance		8,889.00	-		
2009	7266	Maintenance and Repair-Building		700.00	-		
2009	7273	Reproduction & Printing		21,029.42	(8,347.56)	12,681.86	40%
2009	7224	Hearing Expense		3,600.00	-		
2009	7276	Communication Services		25,000.00	(23,597.73)	1,402.27	94%
2009	7203	Registration Fees	19,418.31				
2009	7203	Board Member Registration	8,500.00	27,918.31	(26,749.99)	1,168.32	96%
2009	7330/7334	F & E - Expensed/Inventoried <\$5,000		16,478.13	(13,835.65)	2,642.48	84%
2009	7380	Computer Software - Expense		25,000.00	(23,363.95)	1,636.05	93%
2009	7378	Computer Equip - Inv/Controlled >\$500	26,000.00				
2009	7378	Capital Budget - 55002 - Acquisition of IT + Transfer In	10,981.42	36,981.42	(36,013.21)	968.21	97%
2009	7382	Books & Recorded Materials		1,367.86	(356.00)	1,011.86	26%
2009	7335	Computer Equipment - Parts		25,377.14	(15,541.38)	9,835.76	61%
2009	7211	Awards		2,000.00	(1,139.12)	860.88	57%
2009	7040	Payroll Retirement Contribution		27,185.00	(24,607.85)	2,577.15	91%
2009	7042	Payroll Health Insurance Contribution		55,880.21	(48,572.61)	7,307.60	87%
TOTALS:				1,323,207.22	(1,103,014.14)		83%
<b><u>CAPITAL EXPENDITURES</u></b>							
5000	7371	Personal Property-Passenger Cars-Capitalized		44,000.00	(43,198.00)	802.00	98%
		State Office of Risk Management		8,075.80	(6,801.96)	1,273.84	84%
		Total ADMIN, LIC & ENF		29,269,653.74			
2009	7273	*Reproduction & Printing - Prescription Pad Program		1,943,843.62	(1,918,390.65)	25,452.97	99%
		*UB Controlled Substance Forfeiture Funds -Federal		148,150.37	(148,150.37)	-	100%
		*UB Controlled Substance Forfeiture Funds - State		63,121.71	(63,121.71)	-	100%
		Total ADMIN, LIC & ENF + PAD PROG. + FORFEITURE		31,424,769.44			
* Passed through rev/exp							

This FY2019 Annual Report reflects the objectives accomplished and activities conducted by the agency necessary to implement its *Strategic Plan*. The agency continued to enjoy an excellent reputation with a broad range of customers as a consumer protection advocate and has the support of its activities by the regulated profession.

The numerous accomplishments achieved by TSBP staff are highlighted in each of the division reports. Although specific activities are highlighted under each Division Director's Objectives, TSBP experienced the following major accomplishments and disappointments/constraints in FY2019.

### **FY2019 SIGNIFICANT ACCOMPLISHMENTS**

1. The agency accomplished or partially accomplished all but one of its 91 objectives.
2. Despite turnover and training requirements for new hires, TSBP Compliance Field Staff conducted 3,282 inspections of pharmacies located in Texas, which was only an 8% decrease when compared to 3,553 inspections conducted in FY2018. See Office of the Executive Director's Ongoing Objective #10 for further details regarding inspections.
3. There was a significant increase in registered users and searches conducted through the Prescription Monitoring Program. See Office of the Executive Director Ongoing Objective #27 for more details.
4. Agency Staff gave 104 presentations to over 7,942 individuals. See Legal Ongoing Objective #17 and Office of the Executive Director Ongoing Objectives #5 and #18 as well as Appendix PMP-02 more details.
5. The following TSBP Board Members and staff were appointed to offices, received honors, or received recognition.
  - A. Board members Lori Henke and Donnie Lewis, and Board Executive Director/Secretary Allison Vordenbaumen Benz, were appointed as members of the National Association of Boards of Pharmacy Task Force to Develop Regulations Based on Standards of Care. Board member Daniel Guerrero was appointed as an alternate member.
  - B. Board member Jenny Downing Yoakum was appointed a member of the National Association of Boards of Pharmacy Committee on Law Enforcement/Legislation. Board member Julie Spier was appointed as an alternate member.
  - C. Board Members Rick Fernandez and Bradley Miller were appointed members of the National Association of Boards of Pharmacy Committee on Constitution and Bylaws.
6. Numerous new laws passed during the legislative session concerning the Prescription Monitoring Program had a direct impact on the agency time and resources.

The most significant change was the agency's implementation of the Law Enforcement Access Portal (LEAP), which had to be active by September 1, 2019. LEAP is a portal for approved law enforcement personnel and approved prosecuting attorneys to submit subpoenas, warrants, or court orders for information contained in the Texas Prescription Monitoring Program (PMP). Under the Texas Controlled Substances Act, PMP information

may only be released to a law enforcement official or prosecuting attorney that is engaged in the administration, investigation, or enforcement of a law governing illicit drugs and may only be used for that purpose. This transfer involved a great deal of time by staff to plan and procure the necessary resources, post and interview for new positions which would not be available until FY2020, and devise policies and procedures in a short amount of time.

#### **FY2019 SIGNIFICANT DISAPPOINTMENTS/CONSTRAINTS**

1. All of the Licensing Services Programs continue to grow resulting in increases in workload. See Administrative Services and Licensing Disappointments/Constraint #1 for statistical details.
2. The Board did not have sufficient funding to collect compounding samples in Texas licensed pharmacies.

## FY2019 ANNUAL REPORT

### GOAL

To provide policy advice to the Board, implement Board policies, and manage the organization in a manner that will accomplish the stated mission, goals, and objectives of the agency.

### Objectives (New)

1. **To provide testimony, attend public hearings, and provide any fiscal or technical information, and to review all legislation that has an impact on the practice of pharmacy and agency operations, and monitor the process of this legislation and the legislation outlining the Sunset Commission's recommendations, throughout the 86<sup>th</sup> Texas Legislative Session.**

**Status:**        **ACCOMPLISHED**

**Comment:**    These objectives were accomplished through the following activities:

- A.    A total of 10,877 pieces of legislation were introduced in the 86<sup>th</sup> Regular Legislative Session). The Executive Director assigned a staff member to review each of these bills. A total of 345 bills that affected the agency, or the practice of pharmacy were tracked and monitored (see Appendix EXC-01).
- B.    The Executive Director met or had telephone conversations with Legislators or others or testified before Legislative committees as follows:

Date	Subject, Legislator/Individual, or Committee
9/26/2018	House Cybersecurity hearing – HB 8
10/3/2018	Joint Opioid Committee hearing
1/7/2019	Telephone call with Governor's office
1/25/2019	Meeting with Rep. Zerwas' office and Attorney General's office
1/30/2019	Telephone call with Rep. Price office
1/31/2019	Telephone call with Rep. Stucky's office
1/31/2019	Telephone call with Sen. Perry's office
1/31/2019	Office of the Governor's Child Sex Trafficking Team Briefing
2/4/2019	Senate Appropriations Committee hearing – SB 1
2/4/2019	Telephone call with Rep. Claridy's office
2/7/2019	Meeting with Sen. Watson's office – SB 363
2/11/2019	Meeting with Sen. Hinojosa's office
2/13/2019	House Appropriations hearing – HB 1
2/22/2019	Meeting with Rep. Dean's office
2/22/2019	Meeting with Rep. Bell's office
2/25/2019	Meeting with Rep. Smith
2/26/2019	Meeting with Rep. Buckley
2/26/2019	Telephone call with Governor's office
2/27/2019	Round Table meeting – Rep. Dean's office
3/4/2019	House Appropriations Subcommittee on State Infrastructure, Resiliency, and Investments
3/7/2019	Meeting with Rep. Dean's office
3/12/2019	House Appropriations Committee hearing – HB 1
3/18/2019	Senate Appropriations Committee hearing – SB 1



<b>Date</b>	<b>Subject, Legislator/Individual, or Committee</b>
3/18/2019	Meeting with Rep. Dean's office
3/19/2019	Meeting with Sen. Schwertner
3/20/2019	House Public Health Committee hearing
3/26/2019	Meeting with Rep. Sheffield
4/8/2019	Meeting with Sen. Hinojosa's office
4/9/2019	Health & Human Services Committee hearing – SB 2316
4/10/2019	Public Health Committee hearing – HB 2088
5/1/2019	Homeland Security & Public Safety Committee hearing – SB 363

- C. Legislation that was passed by the 2019 Texas Legislature that has a significant impact on the practice of pharmacy or the operation can be found in Appendix EXC-02.

**2. To direct the submission of, provide testimony for, and monitor the progress of the agency's Legislative Appropriation Request and corresponding performance measures for FY2020-2021.**

**Status: ACCOMPLISHED**

**Comment:** These objectives were accomplished through the following activities:

- A. SB 1 or the Appropriation Act was passed by the 2019 Texas Legislature. The base appropriation for TSBP for FY2020-2021 is a slight increase from the last biennium. In addition, additional funding was received for the Prescription Monitoring Program budget to hire an epidemiologist and offer statewide integration.
- B. Agency personnel, including the Executive Director, participated in meetings regarding the TSBP Legislative Appropriation Request (see New Objective #1).

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**Objectives (Ongoing)**

**1. To manage and monitor the agency's performance and operational efficiency.**

**Status: ACCOMPLISHED**

**Comment:** The agency accomplished or partially accomplished all but one of its objectives. In addition, the agency met or exceeded 8 (80%) of the 10 key performance measures listed in the Appropriations Act and reported on an annual basis to the Legislative Budget Board (LBB) (see Appendix EXC-03).

**2. To coordinate the development of proposed goals and objectives and budget for FY2020 based on the *Strategic Plan* and projected budget, for submission to the Board two weeks prior to the August 2019 meeting.**

**Status: ACCOMPLISHED**

**Comment:** A proposed budget, including revenue projections and fee recommendations, was presented and approved at the August 6, 2019, Board Business Meeting. See Comments under Administrative Services and Licensing, Ongoing Objectives #1

and #3, for additional information.

**3. To help ensure coordination of TSBP activities with federal and other state agencies involved in the regulation of the practice of pharmacy.**

**Status: ACCOMPLISHED**

**Comment:** The Executive Director as well as the agency's Enforcement, Compliance, Investigation, and Legal staffs worked extensively with federal, state, and local regulatory agencies. (See Enforcement Division's Ongoing Objective #5 and Legal Division's Ongoing Objective #5 and #7 for details of these cooperative efforts.)

**4. To review all federal statutes, regulations, and policies that may impact the regulation of the practice of pharmacy and make timely recommendations to the Board for implementation of any required Board actions.**

**Status: ACCOMPLISHED**

**Comment:** The Executive Director and agency staff monitored the activities of the federal Food and Drug Administration regarding compounding pharmacies, the illegal importation of prescription drugs, Internet pharmacies, and counterfeit prescription drugs; and the Drug Enforcement Administration regarding controlled substances and pill mill activities.

**5. As the Executive Director of the Board, to:**

- A. represent Board policies and programs to local, state, and national pharmacy, health-related, and consumer organizations;**
- B. act as the Board's liaison to the pharmacy professional associations;**
- C. maintain a proactive role in the operation of the Health Professions Council; and**
- D. support and participate in the Texas Pharmacy Congress.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. The Executive Director:**
  - 1. Gave 26 presentations to approximately 2,800 persons (see Appendix EXC-04);
  - 2. Participated in 26 interviews with the press (see Appendix EXC-05); and
  - 3. Provided testimony and served as a resource to Interim Legislative Committees and Legislators (see Appendix EXC-06).
- B. Attended 46 meetings, conferences, or participated in telephone calls representing the agency (see Appendix EXC-07).**

- C. The Executive Director attended 3 meetings of the Health Professions Council on the following dates:
1. September 24, 2018;
  2. December 17, 2018; and
  3. June 24, 2019.
- D. The Executive Director attended 4 meetings of the Texas Pharmacy Congress on the following dates:
1. November 13-14, 2018, Austin;
  2. February 20-21, 2019, Tyler;
  3. May 7-8, 2019, Austin; and
  4. August 7-8, 2019, College Station.

**6. To recommend changes to the Texas Pharmacy Act and rules and to recommend policies and procedures that will enhance the agency's ability to protect the public health, safety, and welfare, or will improve the efficiency and effectiveness of the agency's operations.**

**Status: ACCOMPLISHED**

**Comment:** The agenda for each meeting of the Board included a discussion item listing possible suggestions for changes to the Pharmacy Act or Board rules. In addition, each Division has made recommendations for improvements (see Administrative Services Ongoing Objective #13, Enforcement Ongoing Objective #12, and Legal Ongoing Objectives #11, #13, and #14).

**7. To maintain a staff development program by encouraging Executive Office staff to participate in professional and interpersonal development seminars, cross training, and on-the-job training and to conduct periodic reviews and annual evaluations of Division Directors and other direct reports and to monitor evaluations of employees in all Board Divisions.**

**Status: ACCOMPLISHED**

**Comment:** Division staff attended four General Staff Meetings and several trainings as listed below:

- General Staff Meeting, held on September 18, 2018, which included a Civilian Response to Active Shooter Events (C.R.A.S.E.) training presented by the Board's Chief Investigator
- General Staff Training, held on December 13, 2018, presented by Vivian Harvey and Curtis Polk, with TDI (Building a Respectful Workplace: Addressing Sexual Harassment & Discrimination)
- General Staff Meeting, held on December 14, 2018, which included a presentation by Melinda Land of the Employee Retirement System (Beyond Enrollment)

- Management and Team Leader Training, held on January 16, 2019, presented by Alliance Work Partners (Motivating and Engaging your Employees)
- General Staff Meeting, held on February 27, 2019, which included training presented by Eden Males, LCSW, Professional Recovery Network (Mindfulness - A Lesson of Living in the Present)
- Management and Team Leader Training, held on May 1, 2019, presented by Alliance Work Partners (Dealing with Difficult Employee Behavior)
- General Staff Meeting, held on June 10, 2019, which included a presentation by Alliance Work Partners (Assertive Communication)
- All Staff Training "Cruising to Success", held on August 13, 2019 presented by Courtney Lynch and Patrick Nelson of LeadStar, which included a DiSC Workplace Profile assessment for each employee

Evaluations of the Division Directors were completed in August 2019.

**8. To provide the Board information necessary to conduct performance evaluation of the Executive Director by the November 2018 meeting.**

**Status: ACCOMPLISHED**

**Comment:** An evaluation of the Executive Director was conducted at the November 2018 Board Meeting.

**9. To prepare a report on the accomplishments of the Office of the Executive Director and direct the preparation and submission of the agency's *FY2018 Annual Report* to be presented to the Board at the February 2019 meeting.**

**Status: ACCOMPLISHED**

**Comment:** The final draft of the *FY2018 Annual Report* was presented to and approved by the Board at the February 2019 Board meeting.

## **Compliance Program**

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### **GOAL**

To promote voluntary compliance with pharmacy laws and rules. To monitor compliance with pharmacy laws and rules.

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### **Objectives (Ongoing)**

- 10. To conduct 3,000 inspections of all classes of pharmacies located in Texas, including pre-inspections, partial inspections, attempted inspections, inspection-visits, and/or follow-up inspections to "Warning Notices." To conduct inspections of pharmacies located in Texas, according to the following priorities:**
- A. Pre-inspections of pharmacies who are applying for a new pharmacy license within 30 days of completed application;**

- B. Pharmacies that compound sterile preparations prior to initial licensure and prior to pharmacy's expiration date;**
- C. New pharmacies or pharmacies with a recent change of ownership;**
- D. Pharmacies that have received a "Warning Notice" (follow-up inspections);**
- E. Pharmacists and pharmacies who are the subject of a disciplinary order entered by TSBP; and**
- F. Routine inspections.**

**Status: ACCOMPLISHED**

**Comment:** Compliance Field Staff conducted 3,292 inspections of pharmacies located in Texas. This number represented a decrease in inspections as compared to the 3,553 inspections that were conducted in FY2018 (see Appendices COM-01 and COM-02).

- 11. To conduct inspections of pharmacies that compound sterile preparations prior to initial licensure and prior to pharmacy's expiration date. To conduct inspections of pharmacies that do not compound sterile preparations approximately every four years.**

**Status: PARTIALLY ACCOMPLISHED**

**Comment:** This objective was partially accomplished through the following activities:

- A. All new pharmacies that applied for a Class A-S, Class B, Class C-S and Class E-S Pharmacy license were inspected prior to initial licensure. All licensed Class A-S, Class B, Class C-S, and Class E-S Pharmacies were inspected during the pharmacy's licensure renewal period (prior to the pharmacy's expiration date).
- B. As of August 31, 2019, there were approximately 207 Texas pharmacies licensed for more than four years that had not been inspected during the past four years. Although this represent a very small percentage of the total number of pharmacies licensed in Texas, the status of this objective is considered "Partially Accomplished" in that not all Texas pharmacies (licensed for more than four years) have been inspected during the past four years.

- 12. On a random basis, to collect samples of preparations that are compounded by pharmacies located in Texas, including sterile and non-sterile preparations; to monitor the analysis of these samples regarding potency, sterility, fungal and endotoxin testing results.**

**Status: NOT ACCOMPLISHED**

**Comment:** This objective was not accomplished as the Board did not have sufficient funding for the sampling program for the in-state collection of samples FY2019. Only one sample was collected during FY2019.

- 13. To monitor the inspections of Class E-S Pharmacies (Non-Resident Pharmacies who compound sterile preparations) that are conducted by authorized vendors, on behalf of TSBP; to monitor the analysis of samples of compounded preparations that are collected by authorized vendors; to provide training to authorized inspectors, as needed, regarding Texas laws/rules and inspection policies/procedures; and to review activity reports that authorized vendors submit to TSBP on a monthly basis.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

Division staff continued to monitor the inspections of Class E-S Pharmacies by authorized vendors who conducted these inspections on behalf of TSBP, which included the following activities:

- Reviewing inspection reports submitted by vendor inspectors;
- Following up on unsatisfactory conditions that were noted during these inspections;
- Monitoring the analysis of samples of compounded sterile preparations that were collected by vendor inspectors;
- Reviewing monthly activity reports submitted by each vendor; and
- Serving as a liaison with the vendors and vendor inspectors.

During FY2019 vendor inspectors conducted inspections of Class E-S Pharmacies. In addition, these inspectors collected and submitted for testing 68 samples of sterile compounded preparations from different Class E-S Pharmacies. Test results revealed that 3 samples were not within acceptable limits for potency (see Appendix COM-03).

- 14. To review and approve applications from:**

- A. pharmacists performing drug therapy management under the written protocol of a physician; and to maintain a list of pharmacists authorized to sign prescription drug orders for dangerous drugs under a drug therapy management protocol of a physician on the TSBP website;**
- B. Class C pharmacies to allow pharmacy technicians to verify the accuracy of other pharmacy technicians (tech-check-tech); and**
- C. Class C pharmacies located in rural counties to allow pharmacy technicians to perform certain duties when a pharmacist is not on duty.**

**Status: ACCOMPLISHED**

**Comment:** Applications were reviewed and approved for the following:

- Review and approval of 567 applications for pharmacists performing drug therapy management under the written protocol of a physician which were then maintained on the Board's website;

- 30 Class C pharmacies to allow pharmacy technicians to verify the accuracy of other pharmacy technicians (tech-check-tech); and
- 47 Class C pharmacies located in rural counties to allow pharmacy technicians to perform certain duties when a pharmacist is not on duty.

**15. To work with the National Association of Boards of Pharmacy (NABP) in the ongoing development of the Multi-State Pharmacy Jurisprudence Examination (MPJE); coordinate with other staff the review of MPJE item pools on an agreed timetable with NABP to determine appropriate questions for the Texas exam; and provide new questions for the MPJE as appropriate or requested by NABP.**

**Status: ACCOMPLISHED**

**Comment:** The Executive Director, General Counsel, and Assistant General Counsel participated in item writing and item pool review for the MPJE at NABP Headquarters in Mt. Prospect, IL. Compliance staff provided input as necessary.

**16. To audit pharmacists' and pharmacy technicians' compliance with continuing education and to initiate complaints on pharmacists and pharmacy technicians who are not in compliance with the rules regarding mandatory continuing education for renewal, in cooperation with the Enforcement and Legal Divisions.**

**Status: ACCOMPLISHED**

**Comment:** Continuing education audits were conducted on 450 pharmacist and 451 pharmacy technician renewals. Complaints were initiated on one pharmacist and ten pharmacy technicians for non-compliance.

**17. To provide written information to Board customers submitted to the TSBP email address rxlaw@pharmacy.texas.gov.**

**Status: ACCOMPLISHED**

**Comment:** Division staff responded to 1,316 emails submitted to the Board rxlaw email.

**18. To provide professional staff support to Board-appointed task forces and complete other special projects as assigned.**

**Status: ACCOMPLISHED**

**Comment:** Compliance Officer Terri Burrows provided assistance with the Task Force to Review and Update *Guidelines for Establishing Pharmacist Peer Review Committees*. In addition, Compliance Staff provided 53 presentations to approximately 3,732 individuals (see Appendix COM-05).

**19. In cooperation with the Executive Director and other Divisions, to provide internship experience to student pharmacist-interns upon requests from the Texas colleges of pharmacy.**

**Status: ACCOMPLISHED**

**Comment:** TSBP offered internship experience to seven students from four different Colleges/Schools of Pharmacy.

- 20. To assist with and destroy records in accordance with the agency's record retention plan; to update the Program's Policy and Procedure Manual as needed and submit any substantive revisions to the Executive Director for approval.**

**Status: ACCOMPLISHED**

**Comment:** During FY2019, Division staff destroyed records, in accordance with the TSBP record retention schedule, including general correspondence. The Compliance Policy and Procedure Manual was reviewed and updated as necessary.

### **Information Technology Program**

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#### **GOAL**

To advance the business processes and operational efficiencies of the agency through effective implementation of information technology (IT) while maintaining a secure agency information technology environment and ensuring the confidentiality, integrity, and availability of critical data and systems.

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#### **Objectives (Ongoing)**

- 21. To assess current printing, copying, faxing, and scanning infrastructure to provide solutions to increase productivity and efficiencies of agency's technology.**

**Status: ACCOMPLISHED**

**Comment:** New and existing fax lines were transitioned from printing to electronic records through fax-to-email technologies. Methods for agency scanning direct to network were developed to increase efficiency of staff document workflow.

- 22. To improve Continuity of Operations (COOP) and Disaster Recovery (DR) procedures through the migration of on-site IT services and data to cloud services and ensure the availability of these systems through COOP and DR planning, testing and execution.**

**Status: ACCOMPLISHED**

**Comment:** IT Manager strengthened Continuity of Operations (COOP) and Disaster Recovery (DR) procedures, as well as developing additional staff policies and procedures through the transition of on-site IT services and data to cloud services.

- 23. To enforce secure and effective access to technology resources through use of authentication and identity management technologies, staff awareness training, and policies.**

**Status: ACCOMPLISHED**



**Comment:** IT staff was able to maintain a stable infrastructure for existing systems through scheduled, and timely, replacement of hardware/software nearing end of life status. Penetration tests and internal security assessments are performed regularly to identify gaps and vulnerabilities. These gaps and vulnerabilities are then remedied by the agency IT security team. Security training is also provided regularly to agency staff.

**24. To support the agency's effort to identify and implement opportunities for technology education to allow staff to develop and improve technology understanding.**

**Status: ACCOMPLISHED**

**Comment:** IT staff received continual technical and security training to all IT staff to ensure staff is knowledgeable of current technologies and best security practices.

**25. To implement cloud-based productivity services (Office 365) to increase staff efficiency, data security, and accessibility while lowering overhead costs and simplifying IT management.**

**Status: ACCOMPLISHED**

**Comment:** All staff mail services were migrated from on-premise exchange environment to cloud based Microsoft Office 365 to improve resiliency and access. IT staff also transitioned additional agency infrastructure to a virtual environment to provide greater resiliency and access.

**26. To assist with and destroy records in accordance with the agency's record retention plan; to update the Program's Policy and Procedure Manual as needed and submit any substantive revisions to the Executive Director for approval.**

**Status: ACCOMPLISHED**

**Comment:** IT staff destroyed records, in accordance with the TSBP record retention schedule, including general correspondence. The IT Policy and Procedure Manual was reviewed and updated as necessary.

### **Prescription Monitoring Program**

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#### **GOAL**

To collect and monitor prescription data for all Schedule II, III, IV, and V controlled substances dispensed by a pharmacy in Texas or to a Texas resident from a pharmacy located in another state; and to provide a venue for monitoring patient prescription history for practitioners and the ordering of Schedule II Texas Official Prescription Forms.

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#### **Objectives (Ongoing)**

**27. To monitor the registration process of individuals authorized to access the Prescription Monitoring Program and ensure the appropriate use of the PMP.**

**Status: ACCOMPLISHED**

**Comment:** The number of registrants rose by an additional 24,226 registrants from FY2018 (see Appendix PMP-01).

**28. To ensure pharmacies are submitting accurate controlled substance data to the PMP in a timely manner.**

**Status: ACCOMPLISHED**

**Comment:** Program staff reviewed delinquent pharmacy reports on a regular basis. Pharmacies that were not submitting data to the PMP were contacted to get into compliance. In addition, an audit to check for accurate submissions was initiated in FY2019.

**29. To provide notification to prescribers and pharmacists, using threshold indicators, when potentially harmful prescribing pattern or practice may be occurring or drug diversion or drug abuse may be occurring.**

**Status: ACCOMPLISHED**

**Comment:** Push notifications were sent to prescribers and pharmacists on a monthly basis regarding their patients that exceeded the established minimum threshold of 5 prescriptions, issued by 5 prescribers, and dispensed at 5 pharmacies during the prior month. A total of 456 patients were identified as meeting or exceeding the 5-5-5 threshold and 2,547 emails were sent to prescribers of those patients.

PMP staff provided presentations to prescribers and pharmacists regarding the PMP as well as push notifications.

**30. To ensure only authorized prescribers order official prescription forms and to process an order for official prescription forms within three business days of verification of the prescriber.**

**Status: ACCOMPLISHED**

**Comment:** Prescribers ordered 194,678 official prescription pads during FY2019. Each order was reviewed by staff to ensure the validity of the order and prescriber.

**31. To maintain information submitted by wholesalers regarding the distribution of controlled substances to entities in Texas.**

**Status: ACCOMPLISHED**

**Comment:** Texas wholesalers submitted information data electronically to the agency regarding the distribution of controlled substances. The information is maintained to provide investigators with information regarding a licensee's drug ordering history.

**32. To assist with and destroy records in accordance with the agency's record retention plan; to update the Program's Policy and Procedure Manual as needed and submit any substantive revisions to the Executive Director for approval.**

**Status:**        **ACCOMPLISHED**

**Comment:**    PMP staff destroyed records, in accordance with the TSBP record retention schedule, including general correspondence. PMP staff reviewed the Program's Policy and Procedure Manual as a part of the Internal Audit and recommendations were approved and updated as appropriate.

## FY2019 SIGNIFICANT ACCOMPLISHMENTS

1. The Division accomplished 100% of its objectives.
2. The Division met or exceeded 100% of the Key Performance Measures required to be submitted to the Legislative Budget Board.
3. The Division completed multiple additional projects:
  - Completion of the FY2019 Annual Internal Audit Report and implementation of audit recommendations.
  - Completion of the FY2019 Annual Internal Audit Charter, Annual Internal Audit Risk Assessment and Annual Internal Audit Plan.
  - Implementation of the CAPPs Financial Process in the Accounting Division.
  - Completion of EEO Policy Review by the Texas Workforce Commission in May 2019.
  - Various revisions to the Employee Handbook.
  - Review of position descriptions and employee evaluations.
  - Completion of the Health Professions Council (HPC) FY2018 Annual Report.
4. The Agency underwent a successful Risk Program Management Review by the State Office of Risk Management (SORM). Two new recommendations were implemented to help improve that effectiveness of the TSBP risk management program.
5. The Agency underwent a successful Annual Internal Audit for FY 2019 that was focused on the area of Accounting and Financial Reporting. The objective of the Fiscal Year 2019 Annual Internal Audit Report was to ensure that the agency's policies and procedures and internal controls in place over the accounting and financial reporting area provide reasonable assurance of compliance with state requirements, and that complete and accurate financial information is prepared and reported to the Board and various state agencies. Audit recommendations included the following:
  - a. Ensure the Semiannual Security Attestation is submitted timely.
  - b. Implement Procedures to ensure that AFR/USAS balances are consistent with other data sources.

## FY2019 SIGNIFICANT DISAPPOINTMENTS/CONSTRAINTS

1. Most of the Licensing Services Programs continue to grow, resulting in the following increases in workload:

<b>Type of License or Registration</b>	<b>FY2015</b>	<b>FY2016</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>
<b>Pharmacists</b>	31,807	33,130	34,642	35,933	37,358
<b>Pharmacies</b>	7,914	8,074	8,084	8,170	8,210
<b>Pharmacy Technicians</b>	41,990	41,678	42,918	43,330	43,476
<b>Pharmacy Technician Trainees</b>	18,777	20,823	22,868	22,742	21,317
<b>Pharmacist Interns</b>	3,725	4,002	4,009	4,229	4,069
<b>Total</b>	<b>104,213</b>	<b>107,707</b>	<b>112,521</b>	<b>114,404</b>	<b>114,430</b>

2. Between September 2018 and August 2019, five key staff members (the Financial Services Manager/Chief Accountant, the Director of Administrative Services & Licensing, the Staff Services Officer, and two Licensing Specialists) departed from the agency. This workforce turnover resulted in a significant loss of institutional knowledge and impacted efficiency in both administrative services and licensing. There was also a significant expenditure of time and effort in hiring and training of new employees.

## FY2019 ANNUAL REPORT

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### GOAL

To administer agency operations including personnel, finance, purchasing and risk management. To conduct a pharmacy and pharmacist licensure system, intern registration program, pharmacy technician registration system, and the ongoing renewal of licenses and registrations.

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### Objectives (New)

**To assist the Executive Director, in cooperation with other Divisions, in the following new objectives throughout FY2019:**

- 1. To assist the Executive Director, in cooperation with other Divisions, preparing testimony, attending public hearings, providing any fiscal or technical information, reviewing all legislation that has an impact on the practice of pharmacy and agency operations, and monitoring the process of this legislation, throughout the 86th Texas Legislative Session.**
- 2. To monitor the progress of the agency's Legislative Appropriations Request and corresponding performance measures for FY2020-2021.**

**Status: ACCOMPLISHED**

**Comment:** These objectives were accomplished through the following activities:

1. Division staff tracked, reviewed, and analyzed legislation that had a potential impact on agency operations. The Division maintained constant contact with the Legislative Budget Board (LBB) and the Governor's Office of Budget, Planning, and Policy (GBO) to review and discuss the agency's Legislative Appropriations Request for FY2020-21. Fiscal notes were researched and submitted to the LBB.
2. Division staff attended public legislative hearings including the House Appropriations Hearing on the Texas State Board of Pharmacy FY2020-2021 Legislative Appropriation Request and the Senate Finance Committee Hearing on the Texas State Board of Pharmacy FY2020-2021 Legislative Appropriation Request.

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### Objectives (Ongoing) – Administrative Services

- 1. To prepare a proposed budget for FY2020 for submission to the Board two weeks prior to the 2019 May Board Meeting.**

**Status: ACCOMPLISHED**

**Comment:** A proposed budget for FY2020 was presented and approved at the August 2019 Board Meeting.

2. **To prepare and submit all required accounting and fiscal reports/reconciliations in compliance with all applicable state statutes.**

**Status: ACCOMPLISHED**

**Comment:** The agency submitted the Annual Financial Report (AFR) and the Annual Report of Non-Financial Data, to the Office of the Comptroller for the year ending August 31, 2018, by the due dates. The AFR was reviewed by the Comptroller's Office as part of the statewide annual financial report and found to be in compliance.

3. **To review and recommend to the Executive Director additional sources of spendable revenue and to assess fees charged for Board services.**

**Status: ACCOMPLISHED**

**Comment:** A quarterly operating budget was presented to the Board at each of the regularly scheduled business meetings and recorded as such in the official minutes of the Board meetings. Revenue projections and fee adjustments, presented to the Board at the August 2019 Board meeting, were recommended for the coming fiscal year.

4. **To assess the material needs of the agency and supervise the purchasing and supply activities in accordance with all Texas Procurement and Support Services rules and procedures.**

**Status: ACCOMPLISHED**

**Comment:** The Financial Services Manager and Purchaser continued to review all specifications, product tabulations, and purchase requisitions for compliance with agency policies and procedures and CPA rules. This oversight ensured that the appropriate procurement method was identified, the agency received the best value for the product or service purchased, and that funds were always available.

At each board meeting, the Board considered and acknowledged all material changes to the contracts for goods and services in accordance with Section 2155.088 of the Texas Government Code.

5. **To increase the efficiency and productivity of Board office operations by managing and coordinating space needs and on-site maintenance of the Board's office facilities.**

**Status: ACCOMPLISHED**

**Comment:** All issues regarding space needs within the Board's office facility were handled as reported. All on-site maintenance of the Board's office facilities were coordinated with the Texas Facilities Commission coordinator for the Hobby Building as needed.

6. **To serve as the agency's Human Resource Coordinator in ensuring agency compliance with all applicable state and federal personnel statutes.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished as follows:

- A. All newly hired and current employees received Equal Employment Opportunity/Sexual Harassment Training and Sensitive Personal Information Training as required by state law.
- B. Division Directors continued to review and revise employee position descriptions.
- C. Division Director continued implementation of “team leader” quarterly meetings.
- D. The agency updated its Employee Handbook of Personnel Policies and Procedures.
- E. The agency posted 28 positions for employment and received 314 applications during this fiscal year, which resulted in 14 new hires and 7 promotions (see Appendix ADM-01 for EEO data).
- F. Texas Government Code, Section 657.004, requires agencies to set a goal for the employment of veterans in full-time positions equal to at least 20.0% of the total number of agency employees effective September 1, 2015. In fiscal year 2019, the TSBP’s total percent of veterans employed was 7.61%, which is higher than the statewide average of 6.52%.
- G. Workforce demographics released by the Texas State Auditor’s office indicates that on average, employees at the agency were 46 years of age and had 7.55 years of agency length of service. Of the agency’s employees, 62.92% were 40 years of age or older, and 50.55 % had fewer than 5 years of agency length of service. It is estimated that between fiscal years 2020 and 2025, 22% of the agency’s workforce will be eligible to retire.
- H. The agency (98 FTE cap; 89 FTE filled positions) had 17 employees that terminated employment with the agency in FY2019 (see Appendix ADM-01), resulting in a turnover rate of 17.34% (including interagency transfers). This compares to the overall statewide turnover rate of the state of 19.6% and 13.0% turnover rate of Article VIII agencies.

7. **To serve as the Agency Records Retention Manager to the Texas State Library, in maintaining a Records Retention Program for the economical and efficient management of agency records; and to destroy records in accordance with the agency’s record retention plan.**

**Status:** **ACCOMPLISHED**

**Comment:** The agency continues to save valuable square footage by imaging files. The pharmacist, pharmacy technician, and closed pharmacy technician complaint imaging project continued with 379,413 images scanned into the imaging system. Agency staff destroyed 4,416.39 cubic feet of records in accordance with the TSBP records retention schedule, and 33 cubic feet of records were sent to the State Library for storage. In addition, 113 cubic feet of TSBP records stored



at the State Library storage facility were destroyed. Destruction of the records stored at the Library will result in a cost savings of \$252 per year.

- 8. To serve as the Agency Risk Manager by annually assessing areas of agency risk exposures and recommending procedures to control these exposures.**

**Status: ACCOMPLISHED**

**Comment:** The Texas Internal Audit Act requires all agencies to conduct a formal risk assessment and submit an annual Risk Assessment Report to the Office of the State Auditor (SAO). The Agency conducted an assessment of the major programs of the agency (i.e., licensing, enforcement & peer assistance, prescription monitoring, rulemaking, public information, financial operations, information technology) and submitted the Risk Assessment Report by the due date to the SAO.

State Law (TGC §2102.005) requires a state agency to conduct a program of internal auditing that includes an annual audit plan, (TGC §2102.007) the internal auditor (Garza/Gonzalez & Associates) to develop an annual audit plan and (TGC §2102.008) the annual audit plan developed by the internal auditor must be approved by the state agency's governing board. FY2019 Annual Internal Audit Report activities were completed at the August 2019 Board Meeting.

- 9. To provide verbal and written information to Board staff and customers by the assigned due dates, the preparation of the LBB Performance and Funds Management Report and other special reports as requested by LBB, legislative committees, legislators, and others, in conjunction with other Divisions as necessary.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished by providing all required reports by the assigned due dates (see Appendix ADM-002).

- 10. To assist the Executive Director in developing and implementing the objectives of the Health Professions Council.**

**Status: ACCOMPLISHED**

**Comment:** Division staff participated in the following activities:

- A. Active participation in the ongoing implementation of the joint agency/HPC Shared Regulatory Database System project.
- B. Submitted recommendations and licensing performance data to be incorporated into the HPC Annual Report.
- C. Continued participation in several HPC centralized services, such as the Courier Service; Shared Employee Training; Shared Information Resource Technology staff; and use of the imaging system.

11. To manage employees under the supervision of the Division, in compliance with all applicable state and federal personnel statutes, including the following: to hire qualified applicants for new or vacant positions; to update or develop job descriptions in compliance with the State Classification System; to participate in State Classification audits of positions; to conduct periodic reviews and annual evaluations of Division employees; and to promote self-development through such activities as on-the-job training, cross-training, and attendance at professional seminars.

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Staff updated and/or reviewed any revised position descriptions for compliance with all personnel statutes;
- B. Staff prepared new positions descriptions;
- C. Staff conducted regular staff team meetings for division staff and in-house training sessions;
- D. Staff participated in all-staff training; and
- E. Managers conducted the annual evaluation of Division employees by August 2019.

12. To update the Agency Personnel Handbook and the Division's *Policies and Procedures Manual* as needed and submit any substantive revisions to the Executive Director for approval.

**Status: ACCOMPLISHED**

**Comment:** The Agency Personnel Employee Handbook was reviewed, and specific policies were revised and distributed to all staff at the general staff meeting in June 2019.

13. To recommend changes to the Texas Pharmacy Act and rules and to recommend policies and procedures that will enhance the agency's ability to protect the public health, safety, and welfare, or will improve the efficiency and effectiveness of the agency's operations and forward the recommendations to the Executive Director.

**Status: ACCOMPLISHED**

**Comment:** Rules and procedures regarding licensing and registration of pharmacists, pharmacies, pharmacist interns, and pharmacy technicians, are reviewed on a regular basis and recommendations are made as necessary.

14. To prepare a report on the accomplishment of Division objectives for incorporation into the agency's *FY2018 Annual Report* and submit to the Executive Director by the due date.

**Status: ACCOMPLISHED**

**Comment:** The Division's first draft of the *FY2018 Annual Report* was submitted to the Executive Director by the due date. The final draft of the report was submitted to the Board at the February 2019 Board meeting.

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**Objectives (Ongoing) – Licensing**

- 15. To coordinate the collection of licensing data for *Key Performance Targets* required under the 2018-2019 Appropriations Act and to submit to the Executive Director by specified due dates.**

**Status: ACCOMPLISHED**

**Comment:** All licensing statistical data for Key Performance Targets was submitted to the Legislative Budget Board and Governor's Office of Budget, Planning, and Policy by the prescribed due dates, in conjunction with the enforcement performance measures. Within a 5% variance, the division met or exceeded 100% of the Key Performance measures (see Appendix LIC-01).

- 16. To register all qualified pharmacist-interns within an average of ten working days of the receipt of all required documents.**

**Status: ACCOMPLISHED**

**Comment:** At year end, a total of 4,089 interns (student interns, intern trainees, and extended interns) were certified within four days of receipt of required documents. In addition, a total of 6,648 pharmacist preceptors were initially certified or renewed their certification. At fiscal year-end, a total of 12,161 pharmacists were active preceptors.

- 17. To determine the eligibility of all pharmacist applicants applying to take the NAPLEX and Texas Pharmacy Jurisprudence Examination for initial licensing or licensing by reciprocity throughout FY2019.**

**Status: ACCOMPLISHED**

**Comment:** The Texas Pharmacy Jurisprudence Examination was administered 2,140 times with 1,897 candidates passing (see Appendix LIC-02).

Regarding reciprocity (license transfer) in and out of Texas, 846 candidates were licensed by reciprocity in FY2019.

- 18. To provide staff support to the *Examination Retake Committee* and any other advisory committee related to licensing issues as required.**

**Status: ACCOMPLISHED**

**Comment:** Continued to inform applicants who failed the Board licensing examination(s) five times of the recommendations to complete college coursework prior to retaking the examination(s).

19. **To issue a pharmacist license by examination, score transfer, or reciprocity within an average of ten working days after the date the agency receives the examination results.**

**Status: ACCOMPLISHED**

**Comment:** The agency issued 2,232 new pharmacist licenses with an average turnaround time of ten business days from the download of the examination results.

20. **To issue renewal certificates to all pharmacist candidates within an average of five working days of receipt of the required fee and all required documents.**

**Status: ACCOMPLISHED**

**Comment:** The agency renewed 19,159 biennial pharmacist licenses during FY2019. Approximately 95.44% of eligible pharmacists renewed their licenses online. The average processing time to issue a renewal license from receipt of a completed application was one business day and 100% percent of licenses were issued within seven business days. The total population of licensed pharmacists for this fiscal year is as follows:

PHARMACISTS LICENSED	
Active Status	35,184
Inactive Status*	**2,174
TOTALS	37,358

\* Not practicing pharmacy in Texas and not reporting continuing education credits.

\*\*Of the above number, 725 pharmacists have been licensed in Texas for more than 50 years or are greater than 72 years old, and are classified as "exempt."

21. **To issue initial certificates to all pharmacy technician trainee candidates within an average of five working days of receipt of the required documents.**

**Status: ACCOMPLISHED**

**Comment:** The agency issued 11,234 new pharmacy technician trainee registrations bringing the total population of active registered technician trainees for this fiscal year to 21,317. Approximately 96.36% of trainees applied for their registrations online. The average processing time to issue a pharmacy technician trainee registration from receipt of a completed application was one business day and 100% of certificates were mailed within five working days or less.

22. **To issue initial and/or renewal certificates to all pharmacy technician candidates on receipt of the required fees and all required documents according to the following guidelines.**

- A. **initial certificates to pharmacy technician applicants within an average of four working days; and**
- B. **renewal certificates to pharmacy technician applicants within four working days.**

**Status: ACCOMPLISHED**

**Comment:** The agency issued 4,967 new pharmacy technician registrations, and renewed 16,013 registrations on a biennial basis, bringing the total population of active registered technicians for this fiscal year to 43,476. Approximately 93.97% of eligible applicants and pharmacy technicians applied for or renewed their registrations online.

The average processing time to issue a renewal registration from receipt of a completed application was one business day and 100% of certificates were mailed within four working days or less.

The average processing time to issue an initial registration from receipt of a completed application was one business day and 100% of certificates were mailed within four working days or less.

**23. To issue an initial and/or renewal certificate to all pharmacy license applicants on receipt of the required fees and all required documents (including inspection if applicable) according to the following guidelines:**

**A. initial certificates to pharmacy license applicants within an average of 10 working days; and**

**B. renewal certificates to pharmacy license applicants within five working days.**

**Status: ACCOMPLISHED**

**Comment:** The agency issued 454 new pharmacy licenses and 149 changes of ownership, which resulted in 603 new licenses issued. 2,994 licenses were renewed on a biennial basis, bringing the total population of active registered pharmacies for this fiscal year to 8,210. Approximately 21.41% of eligible pharmacies renewed their licenses online (see Appendix LIC-03).

The average processing time to issue a renewal license from receipt of a completed application was five business days and 100% of licenses were mailed within five working days or less.

Although a small percentage of pharmacies continue to use the online payment system for the renewal of their licenses, it should be noted that the inefficiencies of the computer system as well as the lack of automated processes, have necessitated that all pharmacy applications be received and processed in paper format only.

The average processing time to issue an initial license from receipt of a completed application, inspection, and enforcement review was one business day, and 100% of applications were licensed within 10 working days or less.

See Appendix LIC-03 for a breakdown of the total number of pharmacy licenses (business or facilities) issued by the agency.

**24. In cooperation with the Enforcement Division and in compliance with the agency's policies and procedures, to process criminal background checks on applicants for licensure and registration, including fingerprint-based criminal background**

**checks; and to conduct criminal background checks on licensees and registrants on a quarterly basis.**

**Status: ACCOMPLISHED**

**Comment:** Fingerprint-based criminal background checks continued on all applicants for pharmacist-intern, pharmacy technician, and pharmacy technician trainee registrations and pharmacist licensure. In addition, quarterly DPS background checks were run on all individuals, once they were licensed or registered.

### **FY2019 SIGNIFICANT ACCOMPLISHMENTS**

1. The Division accomplished 100% of its Objectives.
2. TSBP met or exceeded 8 of the 10 enforcement-related performance measures and 4 of the 6 key performance measures. (See Ongoing Objective #1 for more information regarding key and non-key performance measures).
3. TSBP received 5,682 complaints that were Jurisdictional or Non-Jurisdictional, which is a 4% decrease from FY 2018. (See Ongoing Objective #2 for additional details regarding complaint data).
4. Division staff continued to promote streamlining of enforcement activities and other regulatory processes utilized in complaint investigations and dispositions. This was accomplished by fully implementing a process that began in FY2017 of originating all complaints as electronic files, reorganizing the working folders on the agency's Shared computer drive for Division staff, and creating new records maintenance computer drives for case referrals and close case retention. In addition, Division staff continued developing more procedures, forms, and checklists for conducting and closing complaint investigations. Additional and frequent working meetings between teams and throughout the Division were implemented in order to ensure the new procedures being implemented was understood and working for employees.
5. Division staff developed and maintained a good workflow for handling the agency's complaints and was able to reduce the age of open complaints greater than 1 year to less than 5% of all complaints by the end of the FY2019.

### **FY2019 SIGNIFICANT DISAPPOINTMENTS/CONSTRAINTS**

1. The Division experienced employee attrition and staffing changes in multiple positions, experiencing an employee turnover rate of 55% (16 of 29 positions) either being vacated due to retirement, resignation, or termination. As a result, Division staff spent time and effort to replace vacant positions (e.g., reviewing applications, conducting interviews, and conducting orientation and training for new employees).
2. In addition to experiencing employee turnover, six employees in the Division were reassigned from the Division to assist with Prescription Drug Monitoring Program duties for several months.

## FY2019 ANNUAL REPORT

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### GOAL

To enforce pharmacy laws and rules through investigations of pharmacies, pharmacists, student pharmacist-interns, pharmacy technicians, and pharmacy technician trainees. To monitor the complaint process and transfer complaints involving substantive allegations to the TSBP Legal Division for review and potential prosecution. To monitor compliance with Disciplinary Orders. To provide enforcement information and information regarding pharmacy laws and rules to agency customers.

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### Objectives (New)

**To assist the Executive Director, in cooperation with other Divisions, preparing testimony, attending public hearings, providing any fiscal or technical information, reviewing all legislation that has an impact on the practice of pharmacy and agency operations, and monitoring the process of this legislation, throughout the 86<sup>th</sup> Texas Legislative Session.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Division Director and staff reviewed bills for fiscal impact and impact to agency and Division operations, when requested; and
- B. Division Director assisted with the implementation of new legislation passed by the 86th Texas Legislature through modification to procedures, development of new agency rules, and review of existing rules that required modification due to legislation.

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### Objectives (Ongoing)

1. **To submit data regarding enforcement and peer assistance data for Key Performance Targets required under the FY2018-2019 Appropriations Act to Executive Director by specified due dates; to assist in the preparation of applicable reports to the Legislative Budget Board and Governor's Budget Office regarding performance measures.**

**Status: ACCOMPLISHED**

**Comment:** Division staff collected data relating to enforcement and peer assistance performance measures. The data was certified and submitted to the Legislative Budget Board (LBB) and Governor's Office of Budget, Planning & Policy (GBO) by the prescribed due dates, in conjunction with licensing-related performance measures. Statistics regarding three enforcement-related performance measures (Number of Jurisdictional Complaints Resolved, Average Complaint Resolution Time, and Number of Individuals Participating in a Peer Assistance Program) were reported to the LBB and GBO on a quarterly basis throughout FY2019. The other seven measures were reported to the LBB and GBO at year-end (annual basis). TSBP met or exceeded, within a 5% variance, 7 of the 10 enforcement-related performance measures and four of the six key performance measures (see Appendix ENF-01).



- 2. To coordinate and monitor, the receipt, assignment, and resolution of all complaints filed with the agency and the notification of complainants. To investigate complaints, according to the following priorities:**
- A. Continuing threats to the public welfare requiring a temporary suspension;**
  - B. Complaints filed against licensees/registrants who have a chemical, mental, or physical impairment;**
  - C. Complaints involving the diversion of prescription drugs, through various illegal means, such as:**
    - theft of drugs;**
    - delivering prescription drugs without a prescription;**
    - dispensing prescription drugs pursuant to an invalid prescription, such as forged or fraudulent prescriptions, prescriptions dispensed following an Internet consultation, prescriptions dispensed originating from a pill mill operation, and unauthorized refills; and**
    - failing to keep and maintain accurate records of purchases and disposals of prescription drugs (i.e., audit shortages);**
  - D. Complaints against licensees/registrants who have been convicted of or received deferred adjudication for a felony that involved drug laws or occurred while engaged in pharmacy practice;**
  - E. Complaints against licensees/registrants who are registered sex offenders;**
  - F. Complaints against licensees/registrants who have been convicted of or received deferred adjudication for a felony relating to offenses not involving drug laws or not occurring while engaged in pharmacy practice;**
  - G. Complaints involving applicants for licensure or registration (not including applications for reinstatement);**
  - H. Complaints involving dispensing errors and malpractice reports;**
  - I. Complaints involving violations of rules relating to patient counseling or drug regimen review;**
  - J. Complaints involving health-care fraud or fraud, deceit, and misrepresentation in the practice of pharmacy, including aiding and abetting a non-licensed individual in the practice of pharmacy;**
  - K. Complaints against licensees/registrants who have been convicted of or received deferred adjudication for a misdemeanor that involved drug laws or occurred while engaged in pharmacy practice;**
  - L. Applications involving reinstatement of revoked licenses and registrations;**
  - M. Complaints against licensees/registrants who have been convicted of or received deferred adjudication for a misdemeanor relating to offenses not involving drug laws or not occurring while engaged in pharmacy practice; and**

**N. Complaints against licensees/registrants who have been subject to a disciplinary action by another state board of pharmacy.**

**Status: ACCOMPLISHED**

**Comment:** TSBP received 5,682 complaints and closed 5,766 complaints, which is 758 fewer closed complaints (12% decrease) in comparison to FY2018. This report accounts for complaint types that are entered as Jurisdictional or Non-Jurisdictional and does not account for complaint assigned as case types of Disciplinary Order, Background Information, Malpractice Report, or Eligibility Letter (see Appendices ENF-02 through ENF-08).

**3. To investigate reports from pharmacies that involve the pilferage of controlled substances by employees; to prepare an annual report regarding the number of individuals, to include the individual's employment position, the category of drug (e.g., opioid, benzodiazepine, muscle relaxant, stimulant) and the number of dosage units of controlled substances per category that have been pilfered during FY2019.**

**Status: ACCOMPLISHED**

**Comment:** TSBP received 265 reports indicating that pharmacies experienced theft of 137,277 tablets, 9,667.5 mls, and 44 patches of controlled substances by 120 individuals due to employee pilferage in FY2019. The drug category experiencing the highest percentage of reported theft due to employee pilferage was opioids, which was 64.5% of total losses reported due to employee pilferage. Benzodiazepine theft reports were 17.5%, which accounted for the second highest drug category of reported losses due to employee pilferage. (see Appendices ENF-09 through ENF-11).

**4. In cooperation with the Licensing Division and in compliance with the agency's policies and procedures, to process criminal background checks on applicants for licensure and registration, including fingerprint-based criminal background checks; and to conduct criminal background checks on licensees and registrants on a quarterly basis.**

**Status: ACCOMPLISHED**

**Comment:** Division staff performed background checks by reviewing fingerprint-based criminal background information on all individuals referred by the Licensing Division staff, accounting for a total of 748 complaints. These referrals covered all applicants for a pharmacist license, including applicants for re- licensure and reinstatement, and all applicants for registration (i.e., technician, technician trainee and intern). In addition, TSBP initiated complaints through the receipt of arrest report(s) on individuals who were fingerprinted during licensure/registration, and initiated complaints based on criminal history information provided on quarterly reports for those licensees/registrants who were not fingerprinted at time of licensure/registration (see Appendix ENF-12).

**5. To provide technical assistance, maintain liaison, and coordinate joint investigations of pharmacists, interns, pharmacy technicians, and pharmacies, with federal, state, and local law enforcement agencies, including health regulatory or administrative agencies.**

**Status: ACCOMPLISHED**

**Comment:** TSBP continued to provide assistance to other agencies, both state and federal. TSBP Field Investigators maintained liaison with law enforcement agencies across the state. In-house investigative staff made hundreds of contacts with courts and law enforcement agencies both in Texas and out of state while conducting criminal background checks.

**6. To monitor compliance with all Board Orders and Agreed Board Orders, including rehabilitation Orders relating to impaired or recovering pharmacists.**

**Status: ACCOMPLISHED**

**Comment:** Almost all of the disciplinary orders entered in FY2019 required some type of monitoring by Division staff (i.e., 356 orders or 89% of the 402 disciplinary orders that TSBP entered during FY2019 required some type of monitoring).

Monitoring included the following types of actions/activities:

- A. Fines & Fees – Division staff, in conjunction with accounting staff, ensured that administrative penalties (fines) and probation fees were paid.
- B. Reinstatement – Division staff monitored the status of reinstatement applicants [e.g., whether applicant completed law exam, internship, and required continuing education within the required time period; reviewing reports from supervising pharmacist(s)].
- C. Rehabilitation Orders – These types of Orders are extremely labor-intensive, including monitoring of random drug screens and the review/evaluation of approximately 12 reports per year per Order [reports from probationer, supervising pharmacist(s), and mental health professional(s)].
- D. Other – Division staff monitored the submission of other documents (e.g., required continuing education and policy/procedures manuals; quarterly reports from a consulting/auditing pharmacist on a pharmacy's operation).

In addition to the in-house monitoring described above, Field Investigators conducted visits of pharmacies for the purpose of monitoring compliance with the terms of the Orders, particularly individuals/facilities who were revoked, suspended, or subject to a probated suspension (see appendices ENF-13 through ENF-18).

**7. To provide verbal and written information to Board staff and customers as needed or required, to include providing technical assistance to other Divisions and responding to surveys and questionnaires.**

**Status: ACCOMPLISHED**

**Comment:** Division employees spent 60 hours a week, answering a total of 14,813 telephone calls directed to the Rules Queue responding to questions regarding laws and rules governing the practice of pharmacy. The Division continues to utilize enhanced, ongoing training for participating Rules Queue staff members, including weekly informational meetings specifically for participants. Web-based content sharing

has been extremely helpful in organizing and providing readily available access to Rules Queue callers/consumers and Division employees servicing the Rules Queue. Externally, a public webpage was developed as part of the agency's website for information and resources related to the Rules Queue. Internally, Rules Queue staff began utilizing a wiki webpage. The wiki webpage is edited weekly regarding TSBP rule content discussed, which allows for topic searchability while assisting Rules Queue callers.

Additionally, the Division mailed customer service surveys to agency customers following completed investigations.

The following activities of the Division supported the Board, agency staff and others:

#### ASSISTANCE TO BOARD MEMBERS AND EXECUTIVE DIRECTOR

- (1) Division Director assisted in the development of the proposed Goals and Objectives for FY2020, which were presented to/approved by the Board at its meeting held in August 2019;
- (2) Division staff made presentations at Board meetings regarding complaint data (e.g., number of open complaints and number of dismissed complaints) and data regarding peer assistance performance measures; and
- (3) Division Director assisted in the review/edit of the drafts of minutes of four Board meetings.

#### TECHNICAL ASSISTANCE TO BOARD STAFF

- (1) Division staff prepared statistical charts relating to the number of disciplinary orders entered by the Board, including information regarding the violations upon which the orders were based and the sanctions that were imposed;
- (2) Open Records Requests – Division Director provided assistance, when needed;
- (3) Proposed Rules – Division Director reviewed drafts of proposed rules, when needed;
- (4) Orientation of New Employees – Division staff conducted orientation sessions with new agency employees;
- (5) Division Director and staff assisted the Prescription Monitoring Program and field compliance team with general guidance, investigative backing, and additional resources for encounters rising to the level of a violation (e.g., required dispensing reporting failures, egregious inappropriate dispensing practices, failure to operate, failure to produce requested pharmacy records, possession of non-FDA approved products, falsification of warning notices);
- (6) Division Director and Division staff served as a resource regarding escalation of violations identified by Compliance Team field staff on a regular basis; and

- (7) Division staff continued to answer telephone calls received via the Rules Queue line regarding the license application process, particularly from technician applicants.

#### TECHNICAL ASSISTANCE TO OTHER AGENCIES AND ORGANIZATIONS

- (1) Division staff submitted required annual report to Office of Attorney General regarding disciplinary actions taken by TSBP with respect to confidentiality violations (required by HB 300);
- (2) Division staff provided assistance to numerous Boards of Pharmacy located in other states; regulatory agencies in this state; federal prosecutors, and federal agencies (e.g., DEA, FDA, and OIG);
- (3) Division Director presented at University of Houston College of Pharmacy's Alcohol, Drugs and You Convocation; and
- (4) Division Director presented with Executive Director to a retail pharmacy's district leaders on TSBP's enforcement process.

#### **8. To serve as liaison for the Board to the Professional Recovery Network (PRN) and to assist in monitoring non-financial contractual obligations of PRN.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Board Member Bradley A. Miller, Ph.T.R., served as an ex-officio member of the PRN State Committee;
- B. Division staff reviewed quarterly activity reports submitted by the PRN Director, and the PRN Director submitted year-to-date financial reports for the PRN Program at each Board meeting;
- C. Division staff attended two PRN State Advisory Committee meetings held on October 6, 2018, and May 1, 2019; and
- D. Enforcement Program Manager worked closely with PRN Program Director to ensure the accuracy of data for peer assistance performance measures.

#### **9. To assist the Executive Director in developing and implementing the objectives of the Health Professions Council.**

**Status: ACCOMPLISHED**

**Comment:** Division Director attended a meeting of the Health Professional Council (HPC) on March 26, 2019, and reported relevant information to the Executive Director following the meeting. Division staff assisted with HPC requests to Versa functionality and worked with HPC staff to develop a necessary code for pharmacy technicians facing registration restriction following disciplinary orders entered by TSBP, which was a new designation against technician registrations in FY2019.

#### **10. To manage employees under the supervision of the Division in compliance with all applicable state and federal personnel statutes, including the following: to hire**

qualified applicants for new or vacant positions; to update or develop job descriptions in compliance with the State Classification System; to participate in State Classification audits of positions; to conduct periodic reviews and annual evaluations of Division employees; and to promote self-development through such activities as on-the-job training, cross-training, and attendance at professional seminars.

**Status:** ACCOMPLISHED

**Comment:** This objective was accomplished through the following activities:

A. Staff Development – The following activities are applicable:

- Division staff attended quarterly General All-Staff Meetings;
- In conjunction with General All-Staff Meetings, Division Director or designee conducted reviews of newly adopted rules with Division staff;
- Division team leaders and staff attended and participated in more frequent Division meetings, biweekly teleconferences held for field investigative staff, and Division team leaders attended and participated in TSBP managers' meetings and trainings;
- Division staff attended professional development seminars in pharmacy and related healthcare areas;
- Division staff participating in TSBP Rules Queue met weekly to discuss rules and related topics;
- In-person complaint reviews were instituted monthly regarding open consumer and criminal complaints with applicable investigative staff and team leaders; and
- Division staff attended informal conferences held by the Board and a Class A pharmacy inspection for observation and training.

B. Performance Evaluations – All Division staff job descriptions were reviewed for accuracy of role and responsibilities. Formal performance reviews were conducted for all Division employees, with the exception of new hires.

**11. To destroy records in accordance with the agency's record retention plan; to review and update the Division's *Policies and Procedures Manual* as needed, and to submit any substantive revisions to the Executive Director for approval.**

**Status:** ACCOMPLISHED

**Comment:** Division staff destroyed records, in accordance with the TSBP record retention schedule. In addition, Division staff continued to convert paper complaint files to imaged records. Approximately 1,169 complaint files were scanned.

**12. To recommend changes to the Texas Pharmacy Act and rules and to recommend policies and procedures that will enhance the agency's ability to protect the public health, safety, and welfare, or will improve the efficiency and effectiveness of the agency's operations and forward the recommendations to the Executive Director.**

**Status: ACCOMPLISHED**

**Comment:** All Division staff made recommendations to improve the efficiency and effectiveness of agency operations. The Division created electronic cases for all complaints received by the agency, and enhanced e-case file naming conventions and file folders to ensure files location and appropriate retention. The Division updated numerous correspondence letters and created additional templates for letters. The Division created new forms for case referral to the Legal Division. Additional Excel spreadsheets for logging of complaints were created for tracking of investigations. Division staff participated in meetings to redesign the agency's public website for ease of access to agency programs and information. Further, Division staff continued creating and updating numerous policies and procedures for operations within the Division and functions of investigations, such as new types of investigations and investigative steps.

**13. To prepare a report on the accomplishment of Division objectives, for incorporation into the agency's *FY2018 Annual Report* and submit to the Executive Director by the due date.**

**Status: ACCOMPLISHED**

**Comment:** The Division prepared and submitted the *FY2018 Annual Report* draft to the Executive Director by the due date. The final draft of the report was submitted to and approved by the Board at its February 2019 Board meeting.

### FY2019 SIGNIFICANT ACCOMPLISHMENTS

1. Division staff accomplished 20 of the Division's 20 objectives for FY2019.
2. During FY2019, the Division initiated 553 disciplinary actions by mailing a Preliminary Notice Letter, entered 402 disciplinary orders, and entered 28 Remedial Plans against licensees and registrants during the fiscal year. Additionally, 83 applicants for registration as a pharmacy technician or pharmacy technician trainee were subject to mandatory withdrawal, indicating that although the Division initiated disciplinary action, the applicant did not complete the process.
3. Approximately 98% of the disciplinary cases against pharmacists and pharmacies and 100% of the cases against pharmacy technicians were settled through the entry of Agreed Board Orders or default Board Orders, and 2% were settled with the entry of Remedial Plans, which resulted in significant efficiencies both in terms of complaint resolution time and agency expenditures.
4. The Division resolved 581 cases against licensees and registrants in FY2019, which was two cases less than the Division received during the fiscal year, either through the entry of disciplinary orders, dismissal of cases, or voluntary and mandatory withdrawal of licensee and registrant applications.
5. The Division resolved nine respondent cases that were filed for administrative hearings at the State Office of Administrative Hearings (SOAH) prior to proceeding to hearing. The cases were resolved through alternative means, such as Agreed Board Orders (ABO) through negotiations with the licensees or their attorneys and through the SOAH Mediation process. One respondent case was resolved through mediation. These resolutions saved the agency considerable resources both in time and expenditures.
6. Administrative hearings were conducted against three respondents at SOAH. These hearings involved preparing motions for summary judgment and numerous discovery documents (including interrogatories and requests for admissions), preparing for trial and for witness examination, depositions, and conducting the hearings where each of the Respondents did not appear. Following the hearings, Motions for Default were filed by the Board, and SOAH issued Conditional Orders of Default Dismissal and Remand in each case. Drafts of Default orders were prepared and entered at the subsequent Board Meetings. The extensive preparation for the hearings required a considerable amount of time, and the Division was able to maintain a fairly consistent number of cases resolved.
7. In order to effectively deal with continuing threat to the public health and safety, the Legal Division continued to evaluate cases, and if such a threat could be established, a panel was convened to hear the cases for potential temporary suspension. Petitions for Temporary Suspension were filed, and Temporary Suspension Hearings were conducted before a Board panel against 9 respondents, two of which were involved in two Temporary Suspension Hearings each, in FY2019.
8. Division staff continued to enhance the legal analysis of nontherapeutic dispensing cases from Enforcement and continued to develop an in-depth and extensive method of preparing and analyzing the cases via Excel and detailed reports for submission for expert pharmacist opinion regarding pill mill activities.



9. Division staff changed the structure of the Informal Conference Disciplinary Panel for technician cases to include two Board Members. The change elicited several positive comments from Respondent's and Respondent's Counsel.
10. Statistics for disciplinary actions entered in FY2019 are as follows:

**PHARMACISTS/PHARMACIES**

<b>FISCAL YEAR</b>	<b>NUMBER OF BOARD ORDERS (BOs)</b>	<b>NUMBER OF DEFAULT ORDERS ENTERED BY BOARD</b>	<b>NUMBER OF AGREED Board of Pharmacy ORDERS (ABOs)</b>	<b>NUMBER OF DISCIPLINARY ORDERS (BOs &amp; ABOs)</b>	<b>% CHANGE IN DISCIPLINARY ORDERS</b>	<b>% ABOs OR DEFAULT OF TOTAL ORDERS</b>
FY15	27	3	275	305	6%	97%
FY16	10	3	316	329	7%	97%
FY17	1	3	320	324	-2%	99%
FY18	2	3	354	359	9.8%	99%
FY19	8	4	242	254	-29%	97%
<b>TOTAL</b>	<b>48</b>	<b>16</b>	<b>1,507</b>	<b>1,571</b>		<b>97.8%</b>

**PHARMACY TECHNICIANS/PHARMACY TECHNICIAN TRAINEES**

<b>FISCAL YEAR</b>	<b>NUMBER OF BOARD ORDERS (BOs)</b>	<b>NUMBER OF DEFAULT BOARD ORDERS (BOs)</b>	<b>NUMBER OF AGREED BOARD ORDERS (ABOs)</b>	<b>NUMBER OF DISCIPLINARY ORDERS (BOs &amp; ABOs)</b>	<b>% INCREASE IN DISCIPLINARY ORDERS</b>	<b>% ABOs OR DEFAULT OF TOTAL ORDERS</b>
FY15	1	70	252	323	1%	100%
FY16	6	52	213	271	-16%	98%
FY17	0	52	149	201	-26%	100%
FY18	0	36	123	159	-20%	100%
FY19	0	36	112	148	-7%	100%
<b>TOTAL</b>	<b>7</b>	<b>246</b>	<b>849</b>	<b>1,102</b>		<b>99%</b>

11. The most significant change was the agency's implementation of the Law Enforcement Access Portal (LEAP), which had to be active by September 1, 2019. LEAP is a portal for approved law enforcement personnel and approved prosecuting attorneys to submit subpoenas, warrants, or court orders for information contained in the Texas Prescription Monitoring Program (PMP). Under the Texas Controlled Substances Act, PMP information may only be released to a law enforcement official or prosecuting attorney that is engaged in the administration, investigation, or enforcement of a law governing illicit drugs and may only be used for that purpose. This transfer involved a great deal of time by staff to plan and procure the necessary resources, post and interview for new positions which would not be available until FY2020, and devise policies and procedures in a short amount of time.
12. Division staff drafted, or assisted others in drafting, and prepared 45 rules for review by the Board.

13. Division staff continue to publish an updated newsletter on the website and by e-mail subscription through Mail Chimp. Twelve issues of the newsletter were published.
14. Division staff completed the reporting of all FY2019 disciplinary actions to NABP/NPDB.
15. The Division expanded online presentation subjects to include sterile compounding and Texas Prescription Monitoring Program education.

#### **FY2019 SIGNIFICANT DISAPPOINTMENTS/CONSTRAINTS**

1. Turnover due to employee termination of employment continued to impact the team. The loss of the prior Director to retirement and the subsequent termination of employment by the new Director significantly impacted the agency. A new Assistant General Counsel for Legislation and Administration was hired to assist the Executive Director and General Counsel with the legislative term and agency administration. This resulted in a significant expenditure of time and effort by the General Counsel and Assistant General Counsel to assist the Executive Director in navigating the legislative session and general administrative and human resource needs of the agency.
2. Division staff spent a great deal of time explaining the confidentiality of the Prescription Monitoring Program (PMP) to members of the public requesting PMP information through subpoenas and open records requests.

## FY2019 ANNUAL REPORT

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### GOAL

To prosecute violations of the laws and rules related to the practice of pharmacy. To provide legal services and guidance to the Board and the agency staff relating to the regulation of the practice of pharmacy and the administration of the agency. To facilitate rule development and provide information services for the agency, including responding to requests for public information, offering educational opportunities, and serving as liaison to the *Texas Register*.

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### Objectives (New)

**To assist the Executive Director, in cooperation with other Teams, in preparing testimony, attending public hearings, providing any legal or technical interpretations, reviewing all legislation that has an impact on the practice of pharmacy and agency operations, and monitoring the process of this legislation, throughout the 86th Texas Legislative Session.**

**Status: ACCOMPLISHED**

**Comment:** These objectives were accomplished through the following activities:

1. General Counsel reviewed and analyzed proposed legislation that had a potential impact on pharmacy practice and on agency operations. At the request of and in the absence of the Executive Director, General Counsel attended legislative hearings regarding agency budget and operation and any pharmacy practice-related issues. General Counsel attended numerous meetings with legislative staff to provide information regarding proposed legislation.
2. General Counsel assisted the Executive Director, in cooperation with other agency staff, in implementing the transfer of the Law Enforcement Access Portal to the Texas State Board of Pharmacy on September 1, 2019. The General Counsel and Assistant General Counsel for Public Outreach worked closely with other agency staff, and the program administrator to develop and implement optimal program specifications.

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### Objectives (Ongoing)

1. **To coordinate and monitor the receipt, assignment, and resolution of all cases accepted by the Division.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Division staff met approximately once a month to discuss the status of pending cases, assess workload allocation, and determine the most effective strategies to complete cases in a timely and efficient manner. The Team Manager also met with the Legal Assistants on a monthly basis to address common issues and monitor progress.

- B. General Counsel and other senior Division staff conducted regular monthly meetings to review the status of cases and the statistical data on the completion of cases to ensure efficient processing of disciplinary cases. As a result, the Division often reallocated resources to most effectively process the cases in a timely manner.
- C. Division staff maintained a database system to track the current status of all cases, thereby increasing efficiency in monitoring cases. In addition, Division staff continued to maintain electronic logs to track dates for mailing of Preliminary Notice Letters, scheduling of Informal Conferences, mailing and receiving of Agreed Board Orders, and other due dates previously recorded on paper to enhance accessibility by all Division staff and improve more efficient and immediate information sharing.
- D. A total of 28 Remedial Plans were entered.
- E. A total of 402 disciplinary orders were entered.

Staff prepared for the presentation of Agreed Board Orders, Board Orders, and Remedial Plans for approval at the four regularly-scheduled Board meetings throughout the year. The presentation of proposed disciplinary actions to the Board at Board meetings involves creating an electronic summary chart along with the orders linked to the chart (see Appendix LEG-01).

2. **To review all cases referred to the Division for potential disciplinary action; and if sufficient evidence exists to warrant action, to institute disciplinary proceedings against licensees within an average of 150 days of the date of the receipt of the case, in accordance with priorities established for the Enforcement Division.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. During FY2019, Division staff reviewed numerous cases prior to referral for disciplinary action to determine whether sufficient evidence existed to warrant prosecution.
- B. During FY2019, Division staff received 583 cases, which involved 247 pharmacist and pharmacy and 336 pharmacy technician and pharmacy technician trainee Respondents, which was an increase from the 558 cases received in FY2018, and resolved 581 cases, which was a decrease from the 603 cases resolved during FY2018.
- C. Division staff mailed 553 Preliminary Notice Letters in FY2019, in accordance with the priorities established for the Division, which was less than in FY2018, when the Division mailed 608 PNLs. Of these PNLs, 284 PNLs were mailed to pharmacists and pharmacies, and 269 PNLs were mailed to pharmacy technicians and pharmacy technician trainees.
- D. The number of days to mail PNLs after the case review date in FY2019 was 67 days which is a decrease from the FY2018 number of 72.5 days. The number of days for PNLs to be sent to pharmacists and pharmacies

averaged 66 days which is a decrease from 90 days in FY2018. PNLs to pharmacy technicians were sent in an average of 71 days from receipt of the case, which is an increase from 55 days in FY2018.

- E. Total resolution time for cases in FY2019 was 147 days from receipt of the case in the Legal Division to the disposition of the case in the Legal Division, which is a decrease from last year's number of 156 days. Case resolution for pharmacists and pharmacies averaged 152 days which is a decrease from 181 days in FY2018. Case resolution for pharmacy technicians averaged 134 days which is an increase from 122 days in FY2018.
- F. The Division filed petitions and conducted Temporary Suspension Hearings for three cases involving a total of 9 respondents comprised of six pharmacists and three pharmacies. Two of the pharmacists were involved in two separate emergency suspension hearings during the fiscal year for separate cases. Eight temporary suspension petitions were granted, and one was denied.

Following the temporary suspensions, three cases were referred for hearing at the State Office of Administrative Hearing. One case resolved with ABOs prior to filing, one case resolved in Mediation, and one case had a hearing and a Board Order was entered.

**3. To plan and conduct a minimum of 24 days of informal conference sessions in FY2019 to adjudicate violators of pharmacy laws/rules.**

**Status: ACCOMPLISHED**

**Comment:** The Division prepared for and conducted 31.5 days of Informal Conferences for 375 Respondents comprised of 206 pharmacy, pharmacist, and intern licensees and applicants and 169 registrants and applicants. The number of Respondents only varied by 1 from the total of 376 in FY2018, while the mix of Respondents was down from the total of 240 pharmacy, pharmacist and intern licensees and up from the total of 144 registrants and applicants in FY2018 (see Appendix LEG-02).

Division staff used electronic notebooks for all informal conferences, thus allowing the informal conference panel to access the allegations and evidence on computer laptops and reducing copying cost and staff time to prepare informal conference notebooks. Division staff also prepared this information in advance to allow the Board members additional time to review the cases prior to informal conference.

**4. To refer disciplinary cases to the State Office of Administrative Hearings (SOAH) and file a complaint with SOAH within an average of 180 days of the date that the agency determines the case cannot be settled with an Agreed Board Order.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. At the onset of FY2019, three respondent cases were ongoing following the filing of a complaint at the State Office of Administrative Hearings in FY2018 and pending a resolution. The Division filed formal Complaints at

SOAH, within an average of 180 days from the date the case failed to settle with an Agreed Board Order, for 14 additional respondent cases in FY2019.

- B. Nine respondent cases were resolved prior to a full contested administrative hearing being conducted at SOAH. Of these cases, one respondent case was resolved through the SOAH mediation process. The remaining cases were resolved otherwise, including through negotiations. This resolution was beneficial in saving the agency both considerable time and effort in the alternative of preparing for and presenting a full contested case hearing. However, considerable preparation was required for several of the cases because they were not resolved until shortly before the scheduled hearing date.
- C. Administrative hearings were conducted against three respondents in FY2019. Proposals for Decision (PFD) were issued by the Administrative Law Judges against three respondents during FY2019. Three respondent cases were pending a hearing at the end of FY2019.
- D. SOAH performed 45 hours of work on three cases for the Board in FY2019, totaling approximately \$2,382.00 in direct hearings expenses and \$7,370.00 in total case expenses. These SOAH hours decreased from FY2017 which had 338.25 hours of work on cases.

**5. To research legal issues and provide legal services and advice to the Board and agency staff; to provide legal services to the Enforcement and Administrative Services and Licensing Divisions regarding interpretation of the laws and rules.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Legal Research and Advice on Agency Administration
  - (1) General Counsel continued to work to develop efficient procedures for Board member access to case information prior to informal conferences.
  - (2) General Counsel served as Fraud Coordinator for the agency.
  - (3) General Counsel and Division staff provided legal advice and consultation on numerous personnel issues during FY2019, including:
    - (a) assisted with issues in various hiring/disciplinary processes and complaints against agency employees;
    - (b) advised regarding FMLA leave issues and sick leave pool requests;
    - (c) provided legal advice regarding outside employment for agency staff;
    - (d) developed and/or reviewed performance plans and/or probation;

- (e) interviewed applicants for new positions;
  - (f) assisted with resolution of complaints against agency employees;
  - (g) developed and/or reviewed policy changes for TSBP Employee Handbook;
  - (h) attended presentations and webinars to keep apprised of current trends in labor and employment law.
- (4) General Counsel served as the agency's Ethics Advisor and continued to assist Board Members and staff with legal and ethical issues.
  - (5) General Counsel assisted in the review/drafting of proposed rules and preambles for rules, and the review of rule submissions to the Texas Register for all rules either proposed or adopted during FY2019. See Ongoing Objectives numbers 13 and 14 for a summary of specific rule proposals and submissions.
  - (6) General Counsel and Division staff reviewed requests for public information in clarifying requests and requesting assistance from the OAG.
  - (7) General Counsel consulted with other Division Directors regarding the evaluation of results of the Survey of Employee Engagement completed by agency staff.
  - (8) General Counsel and Division staff assisted in the review and preparation of minutes of four regularly-scheduled Board meetings.
  - (9) General Counsel reviewed and participated in meetings regarding agency contracts.

**B. Technical Assistance to Enforcement Activities**

- (1) Division staff researched numerous issues, including the determination of crimes of moral turpitude, various forms of disposition for criminal cases and applicability of actions taken in other jurisdictions, and other pharmacy- and litigation-related legal issues.
- (2) General Counsel attended meetings, as requested, to provide legal guidance on inspection and investigative issues.
- (3) Division staff drafted numerous subpoenas and voluntary revocation orders to assist with the investigative work of the TSBP investigators.
- (4) Division staff handled legal questions from all staff regarding a myriad of issues.
- (5) General Counsel and Division staff reviewed complaint files for pharmacists and pharmacies and provided guidance regarding the identification of violations and the resolution of the cases. In

addition, General Counsel and Division staff reviewed complaint files on pharmacy technicians to determine type of violation and appropriate action, as previously determined by the Board.

- (6) General Counsel and Division staff made presentations at all Board meetings held in FY2019. Presentations included information about proposed Agreed Board Orders, Remedial Plans, and proposed Board Orders following SOAH proceedings.
- (7) General Counsel participated in meetings to discuss appropriate action regarding questions/issues raised by licensees.
- (8) Division staff informed the Enforcement staff of disciplinary actions to be taken by the Board prior to entry of the orders, to ensure the correct information is immediately available on the computer system.
- (9) Division staff assisted the Enforcement Division with issues involving the monitoring of impaired pharmacists, including legal consultation on handling of positive drug screens and interfacing with the PRN program.
- (10) Division staff drafted ineligibility issues for pharmacist applicants who did not qualify for licensure under the Texas Pharmacy Act.
- (11) Division staff redacted files to comply with orders of expunction and of non-disclosure regarding criminal offenses.
- (12) Division staff assisted Compliance staff with questions during inspections and regarding follow-up issues.
- (13) General Counsel consulted with the Director of the Professional Recovery Network regarding disciplinary implications for certain findings by Mental Health Professionals.
- (14) General Counsel reviewed the contract proposals and participated in the bid proposal process for agency vendors.

C. Legal Services for Licensing

- (1) Division staff assisted with recommendations on eligibility for licensure and registration, verified accuracy of letters, and handled cases through the legal process.
- (2) General Counsel reviewed requests for accommodation under the Americans with Disabilities Act for legal compliance.
- (3) General Counsel was consulted on issues concerning licensing of pharmacists and pharmacies and regarding application forms.
- (4) General Counsel advised the Division Director and Licensing staff on numerous questions regarding pharmacy classifications.
- (5) General Counsel advised the Division Director and Licensing staff on removal of attestation questions from applications.



D. Other Legal Services regarding Pharmacy Issues

- (1) General Counsel participated in TSBP AWARe Account meetings regarding the PMP and attended quarterly PMP Interagency Meetings.
- (2) General Counsel participated in meetings and teleconferences regarding any pending pharmacy issues as required.
- (3) General Counsel and Division staff participated in the drafting and review of the question pool for the Multistate Jurisprudence Examination to ensure the validity of the questions in the pool.
- (4) General Counsel and Division staff participated in teleconference meetings of committees to review requests for pilot projects and assisted with development of rules on related issues.
- (5) General Counsel assisted the Executive Director in preparation for House and Senate Committee Hearings.
- (6) General Counsel and Division staff contributed to the review and updating of the electronic Compliance Inspection Forms and Warning Notices.
- (7) General Counsel participated in meetings regarding the Internal Auditors and their report.
- (8) General Counsel and Division staff assisted representatives of the US Department of Justice (DOJ) and/or Drug Enforcement Agency (DEA) regarding Pill Mill prosecution and actions being taken by the Board.
- (9) General Counsel and Division staff participated in the orientation and annual training for Board members.

**6. To review and monitor the *Texas Register* for Attorney General opinions; to draft requests for Attorney General opinions; to serve as liaison for the Board to the Office of the Attorney General (OAG); to monitor and assist with appeals, injunctions, or civil litigation handled by the OAG against pharmacists or non-pharmacists**

**Status:** ACCOMPLISHED

**Comment:** This objective was accomplished through the following activities:

- A. Division staff reviewed new opinions of the Office of the Attorney General for applicability to TSBP and disseminated any relevant material to appropriate agency personnel.
- B. Liaison with the Office of Attorney General
  - (1) Division staff continued to serve as liaison with the OAG throughout FY2019. Ted Ross served as the Assistant Attorney General assigned to TSBP from the OAG Administrative Law Division.

- (2) Appeals; Injunctions; Civil Litigation
  - (a) General Counsel coordinated representation regarding appeals of Board Order.
  - (b) General Counsel coordinated representation regarding challenges to subpoenas.
- (3) Requests for OAG rulings
 

Division staff drafted requests for open records rulings for filing with the OAG.
- (4) General Assistance
 

General Counsel answered questions from OAG attorneys regarding various pharmacy and/or agency issues.

**7. To provide verbal and written information to Board staff and customers, including responses to surveys and questionnaires, as needed and required; to provide legal assistance and maintain liaison with appropriate local, state, and federal prosecutors, legal divisions, and enforcement agencies involved in pharmacy practice regulation.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

**A. Surveys/Questionnaires and Other Correspondence**

General Counsel and Division staff responded to following surveys:

- (1) Annual survey from the State Office of Administrative Hearings; and
- (2) Client survey from the OAG.

**B. Technical Assistance to Other Agencies and Organizations**

- (1) General Counsel and Division staff consulted with the Director of the Professional Recovery Network to discuss the handling of cases involving impaired pharmacists.
- (2) Division staff attended Public Service Career Day at the University of Texas School of Law.
- (3) General Counsel participated in meetings and other communications with the FDA regarding compounding of sterile products.
- (4) General Counsel reviewed proposed rules of Texas Medical Board prior to stakeholder meetings and attended meetings to provide input. Division staff coordinated with the Texas Medical Board regarding the prosecution of cases and/or rulemaking.
- (5) General Counsel and Division staff engaged with US DOJ, DEA, DPS, the Texas Medical Board and other law enforcement and prosecutorial agencies regarding enforcement of laws against pill mills.

- (6) Division staff participated in the Texas Government Social Media Alliance meetings.
- (7) Division staff coordinated with and/or assisted state and federal prosecutors, DEA investigators, and Board staff in other pharmacy and pharmacist licensing jurisdictions with questions and requests as needed throughout the fiscal year.
- (8) General Counsel consulted with outside agencies licensing healthcare professionals regarding the Prescription Monitoring Program.

D. Technical Assistance to the Legislature

General Counsel and/or Division staff responded to questions from and attended meetings with Legislators/legislative staff and Governor's staff regarding pharmacy and/or agency issues and related to proposed legislation.

E. Technical Assistance to the Press and the Public

- (1) Division staff answered numerous telephone calls from pharmacist and pharmacy technician applicants and licensees/registrants regarding the application process and the associated disciplinary process, including providing information about denial of registration and options for Informal Conference.
- (2) Division staff answered questions from licensees, attorneys, and other members of the public regarding legal issues, including:
  - (a) licensing eligibility and requirements;
  - (b) effect of convictions and deferred adjudications and/or probation for various crimes on registration and licensure;
  - (c) applicability of pharmacy laws and rules; and
  - (d) schedules for resolution of pending cases.
- (3) Division staff participated in UT Law School educational and recruitment programs.
- (4) General Counsel provided information to various reporters researching pharmacy-related stories
- (5) General Counsel consulted with pharmacy business entities on issues regarding implementing proposed business models.

**8. To assist the Executive Director in developing and implementing the objectives of the Health Professions Council (HPC).**

**Status:** ACCOMPLISHED

**Comment:** This objective was accomplished through the following activities:

General Counsel and Division staff participated in discussion with members of the HPC Legal Committee, which includes attorneys from other agencies, as

requested to discuss common problems identified with handling of legal cases for HPC agencies.

9. **To manage employees under the supervision of the Division, in compliance with all applicable state and federal personnel statutes, including the following: to hire qualified applicants for new or vacant positions; to update or develop job descriptions in compliance with the State Classification System; to participate in State Classification audits of positions; to conduct periodic reviews and annual evaluations of Division employees; and to promote self-development through such activities as on-the-job training, cross-training, and attendance at professional seminars.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished through the following activities:

- A. Division staff was evaluated on an annual basis, as required by agency policy.
- B. General Counsel conducted team meetings approximately once a month with Division staff. Legal Assistants met with the Team Manager on a bimonthly basis.
- C. Division staff conducted the hiring process to fill numerous positions.
- D. Division staff interviewed for and had two legal interns to provide assistance with the preparation of legal cases.
- E. General Counsel and/or Division staff prepared and conducted orientations for all new TSBP employees and interns regarding the Legal Division, the disciplinary process, ethics, and Public Information, Open Meetings Acts, and Rulemaking.
- F. Division staff attended general staff meetings and in-house training sessions. In addition, Division attorneys attended required continuing legal education, and Division staff attended various programs, seminars, and events.

10. **To destroy records in accordance with the agency's record retention plan; to review and update the Division's Policies and Procedures Manual as needed and submit any substantive revisions to the Executive Director for approval.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished as follows:

- A. Records Management

Division staff destroyed records, in accordance with the TSBP record retention schedule, including general correspondence. Division staff also prepared and indexed material for electronic storage. In addition, Division staff revised the shared directory structure for improved use by the Legal Division to simplify access to files.

- B. Policies and Procedures

- (1) Division staff updated and maintained Disciplinary Notebooks containing all Board Orders and Agreed Board Orders.
- (2) Division staff updated samples of preliminary notice letters and forms for pharmacist and pharmacy disciplinary actions and for pharmacy technicians and technician trainees.
- (3) Division staff continued to review and draft/update written policies and procedures for handling of cases to provide reference and training material for the Division positions.
- (4) Division staff continued to review and updated procedures to handle expunction and nondisclosure orders for varying types of complaints and cases.
- (5) Division staff updated procedures for drafting ABOs to streamline the process and ensure that all paragraphs are up-to-date with the latest changes.

**11. To recommend changes to the Texas Pharmacy Act and rules and to recommend policies and procedures that will enhance the agency's ability to protect the public health, safety, and welfare, or will improve the efficiency and effectiveness of the agency's operations, and forward the recommendations to the Executive Director.**

**Status: ACCOMPLISHED**

**Comment:** This objective was accomplished as follows:

- A. Division staff continued the process of posting the scanned version of prior actions entered within the last 10 fiscal years on the agency's website. The ongoing process includes scanning and archiving prior disciplinary actions in PDF files on the shared drive, which has also assisted Board staff by allowing for easy access to the prior orders.
- B. Division staff continued to work on improving the presentation of proposed disciplinary actions to the Board at Board meetings through the use of a detailed summary of those actions entered by the Executive Director and those to be entered by the Board on the electronic notebooks.
- C. Division staff continued to work to improve the use of a secure mechanism for Board member access to confidential information regarding informal conferences and Board meeting presentation material (i.e., proposed disciplinary orders) prior the date of the meeting.
- C. General Counsel and Division staff served as on the agency's Wellness Committee and coordinated the following programs:
  - (1) Maintain No Gain;
  - (2) Farm-to-Work;
  - (3) Provision of flu shots;
  - (4) Weekly yoga classes; and

- (5) other programs and/or presentations.

In addition, General Counsel conducted agency survey regarding utilization of the program. Agency staff responded positively to the survey, and the results were used in the development of new programs.

- E. The General Counsel coordinated with insurance provider for an agency wellness assessment and/or activities.
- F. Division staff developed a Calendar of Events for FY2020 for informal conferences and reserved conference rooms accordingly.
- G. General Counsel reviewed expenditures of seizure money for compliance with laws and policies.
- H. Division staff updated automatically generated letterhead which resulted in significantly reduced printing costs.
- I. General Counsel and Division staff provided ongoing analysis and preparation of pill mill cases for presentation to pharmacist experts for expert opinions on whether to proceed with disciplinary action.
- J. Division staff continued to update as needed the standard Agreed Board Order guidance paragraphs. Division staff also continued to update as needed the Preliminary Notice Letter standard paragraphs to reflect updates to language routinely used and to accommodate changes in laws and rules.
- K. Texas Pharmacy Act  
General Counsel submitted changes to the Pharmacy Act for approval by the TSBP regarding disciplinary and legal proceedings for the legislative session.
- L. Board Rules
  - (1) General Counsel and Division staff drafted rule changes to disciplinary guidelines and disciplinary sanctions for all licensees and for professional responsibility, and reviewed and recommended modifications for rules changes presented to the Board.
  - (2) General Counsel and Division staff reviewed rule changes throughout the fiscal year.

- 12. To prepare a report on the accomplishment of Division objectives, for incorporation into the agency's *FY2018 Annual Report* and submit to the Executive Director by the due date.**

**Status:** **ACCOMPLISHED**

**Comment:** The Division's first draft of the *FY2018 Annual Report* was submitted to the Executive Director by the due date. The final draft of the report was submitted to the Board at the February 2019 Board meeting.

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**Objectives (Ongoing) – Rulemaking and Open Government**

13. To develop rules for consideration by the Board relating to professional issues and to assist other Divisions with the development of rules pertaining to Board operations.

**Status:** ACCOMPLISHED

**Comment:** The Assistant General Counsel and Division staff spent a considerable amount of time drafting rules, assisting others in the drafting of rules, and preparing and presenting the rules for review by the Board. The Assistant General Counsel and Division staff continue to work on improving the presentation of the rules to the Board at Board meetings through the use of easily accessible electronic documents with highlighting and bookmarks where appropriate. Changes required by the Board were made quickly to allow final review by the Board in a timely manner, usually during the same Board meeting. The Assistant General Counsel drafted, or assisted others in drafting, and prepared 45 rules for review by the Board (see Appendix LEG-03).

14. To act as agency liaison to the *Texas Register*, coordinate and monitor all submissions to the *Texas Register*, to review and monitor the *Texas Register* for submissions of other agencies that would impact the agency, and to provide periodic notice of publications to Board Members, staff, and other interested parties.

**Status:** ACCOMPLISHED

**Comment:** Division staff accomplished the objective through the following activities:

**RULE SUBMISSIONS TO THE *TEXAS REGISTER***

Ninety submissions to the *Texas Register* were made that proposed, adopted, reviewed, repealed, or withdrew amendments or new Texas Pharmacy rules. Rule reviews were submitted and published as required. Division staff met all deadlines for submissions to the *Texas Register*; monitored the submissions for action, and notified Board Members, TSBP staff, and other interested parties of the status of rules.

The Assistant General Counsel provided memoranda to Board members, staff, and interested parties regarding action taken by the Board on rules on the following dates:

- November 9, 2018
- February 8, 2019
- May 8, 2019
- August 7, 2019

**OPEN MEETING SUBMISSIONS TO THE *TEXAS REGISTER***

Thirteen notices of open meetings scheduled were submitted by the Division to the *Texas Register* for publication.

Statistics regarding Rules submitted and Open Meetings submitted to the *Texas Register* can be found on Appendix LEG-04.

- 15. To respond to open records requests, in accordance with the procedures set forth in the Texas Public Information Act and to draft requests for open records decisions from the Office of the Attorney General; to notify various state and federal agencies regarding disciplinary orders entered by the Board.**

**Status: ACCOMPLISHED**

**Comment:** The agency experienced a 20% increase in the number of initiating written requests for records in FY2019, as compared to FY2018. Division staff updated the open records intake, processing, and approval process to be entirely electronic, which allowed requests to be handled more efficiently (see Appendix LEG-05).

- 16. To provide educational outreach to licensees/registrants about current laws and rules and to provide information consistent with the responsibilities of the Board through the publication of agency updates, webinars, training videos and tutorials, social media posts, and other instructional opportunities.**

**Status: ACCOMPLISHED**

**Comment:** Division staff accomplished this objective through the following activities;

- A. Twelve issue(s) of the *TSBP Newsletter* were published on the TSBP website.

The Division continued to use Mail Chimp, an online email system to manage email addresses and send email notices. The use of Mail Chimp improved agency efficiency by using less paper and postage. The number of subscriptions to the account steadily increased with over 11,116 subscribers at the end of the FY2019 (approximately 0.5% increase as compared to FY2018)

- B. The Division provided 16 online presentations to 1,410 individuals (see appendix LEG-06). The Division expanded online presentation subjects to include sterile compounding and Texas Prescription Monitoring Program education.

- C. Eight educational videos were produced and posted on YouTube during FY2019, including two LEAP tutorials regarding registration and report requests, respectively; four finalized videos in the Prevention of Audit Shortages in the Pharmacy series; and two Board Meeting videos. Total video views in FY2019 were approximately 24,500 (a 22% decrease as compared to FY2018). However, subscribers rose by approximately 200 individuals.

- D. Facebook, Twitter, and YouTube continued to be useful tools to provide information. At the end of FY2019, over 5,696 individuals “liked” TSBP on Facebook (an increase of 13.03% from FY2018) and over 2,091 individuals “followed” TSBP on Twitter (an increase of 4.34% from FY2018). A total of 76 posts were made on Facebook/Twitter.





<b>86<sup>th</sup> Texas Legislature (2019), Regular Session</b>					
		<b>Session</b>		<b>TSBP Monitored</b>	
		<b>Filed</b>	<b>Passed</b>	<b>Filed</b>	<b>Passed</b>
<b>House</b>					
	Bills	4,765	969	210	41
	Resolutions	2,550	2,324	6	0
	<b>House Total</b>	<b>7,315</b>	<b>3,293</b>	<b>216</b>	<b>41</b>
<b>Senate</b>					
	Bills	2,559	460	125	33
	Resolutions	1,003	888	4	0
	<b>Senate Total</b>	<b>3,562</b>	<b>1,348</b>	<b>129</b>	<b>33</b>
<b>Regular Session Total</b>		<b>10,877</b>	<b>4,641</b>	<b>345</b>	<b>74</b>

BILL NUMBER	SUMMARY OF THE PROVISIONS OF THE BILL	EFFECTIVE DATE
HB 1	General Appropriations Act	9-1-19
HB 1264	Pharmacists will continue to be required to communicate to a prescribing practitioner within three days certain information about a biological product dispensed to a patient as the bill repealed the September 1, 2019 expiration date of the requirement.	Effective Immediately
HB 1518	Prohibits a business from dispensing, distributing, or selling dextromethorphan to a customer "over the counter" if the customer is under 18 years of age. Pharmacists may dispense dextromethorphan with a valid prescription to someone less than 18 years of age.	9-1-19
HB 1899	Amends Chapter 108, Occupations Code by adding a new Subchapter B: AUTOMATIC DENIAL OR REVOCATION OF HEALTH CARE PROFESSIONAL LICENSE. TSBP shall immediately revoke a pharmacist's license (does not include pharmacy technician) on notification by a court or parole panel or deny an application for a pharmacist's license for an applicant who: (1.) is required to register as a sex offender under Chapter 62, Code of Criminal Procedure, (2). has been previously convicted of or placed on deferred adjudication community supervision for the commission of a felony offense involving the use or threat of force, or (3.) has been previously convicted of or placed on deferred adjudication community supervision for the commission of an offense under Section 22.011, 22.02, 22.021, or 22.04 Penal Code, or an offense under another similar state or federal law, committed when the applicant held a license in this state or another state, in the course of providing services within the scope of the pharmacist's license in which the victim of the offense was a patient of the applicant. Applies to an application for a license for a pharmacist pending on or submitted on or after September 1, 2019. There are also procedures and qualifications for reapplication and reinstatement.	9-1-19
HB 2059	Requires a health care practitioner, including a pharmacist who provides direct patient care to complete a training course approved by HHSC on identifying and assisting victims of human trafficking as a condition for license renewal beginning September 1, 2020. Also requires, the applicable licensing agency to provide notice to a health care practitioner of the training required under Chapter 116, Occupations Code as soon as practicable after the effective date of this Act.	9-1-19
HB 2088	Requires the TSBP to adopt rules to prescribe the form of a written notice informing certain patients who receive a C-II about locations at which Schedule II controlled substance prescription drugs are accepted for safe disposal. The notice, in lieu of listing those locations, may provide the address of an internet website specified by the board that provides a searchable database of locations at which Schedule II controlled substance prescription drugs are accepted for safe disposal. The board may take disciplinary action against a person who fails to comply with the notice provision.	9-1-19
HB 2174	<b>SECTION 3.</b> Amends Section 481.003(a) Health and Safety Code to allow the board to adopt rules to administer new Sections <u>481.0755. Written, Oral and Telephonically Communicated Prescriptions.</u> , and <u>481.0756 Waivers from Electronic Prescribing.</u> As well as <u>481.07635 Continuing Education.</u> and <u>481.07636. Opioid Prescription Limits.</u> Requires Electronic Controlled Substance (CII-CV) Prescribing beginning January 1, 2021. <b>SECTION 4, 5, and 6.</b> Specifies when a prescription for a controlled substance is required to be issued electronically. <b>SECTION 7.</b> Adds new <u>Section 481.0755. Written, Oral and Telephonically Communicated Prescriptions</u> and new <u>Section 481.0756 Waivers from Electronic Prescribing.</u> Requires TSBP to convene an interagency workgroup to establish recommendations and standards for appropriate waiver circumstances and a process for requesting and receiving a waiver. <b>SECTION 8.</b> Deletes board authority to permit by rule multiple CIII- V prescriptions on one form. <b>SECTION 9.</b> 2 HRS CE for pharmacists about prescribing and monitoring controlled substances shall be completed not later than the first anniversary after the person is issued a license. (applies towards ethics credit) TSBP shall approve professional education to satisfy the requirements. Mandates 10 Day Opioid Prescription Limits for Acute Pain. No refills allowed. <b>SECTION 11.</b> Adds new offense to Section 481.129(a), Health and Safety Code: knowingly possessing, obtaining, or attempting to obtain a controlled	9-1-19

BILL NUMBER	SUMMARY OF THE PROVISIONS OF THE BILL	EFFECTIVE DATE
	substance or an increased quantity of a controlled substance through the use of a fraudulent electronic prescription. <b>SECTION 14.</b> Amends Section 554.051(a-1) Occupations Code to allow the board to adopt rules to administer new <u>Sections 481.0755. Written, Oral and Telephonically Communicated Prescriptions.</u> , and <u>481.0756 Waivers from Electronic Prescribing.</u> As well as <u>481.07635 Continuing Education.</u> and <u>481.07636. Opioid Prescription Limits.</u> <b>SECTION 15.</b> Adds additional grounds for discipline regarding applicant for or holder of a Class E or nonresident pharmacy license. (8.) <b>SECTION 17.</b> Dispensers of controlled substances shall complete two hours of professional education related to approved procedures of prescribing and monitoring controlled substances no later than September 1, 2021 for person with license issued before September 1, 2020.	
HB 2425	Allows a physician to delegate to a pharmacist practicing in a federally qualified health center (FQHC) the implementation or modification of a patient's drug therapy under protocol, including the authority to sign a prescription drug order for dangerous drugs.	9-1-19
HB 2847	(1.) Requires a pharmacy that does not dispense any controlled substance prescriptions during a period of seven consecutive days to send a report to the board indicating that the pharmacy did not dispense any controlled substance prescriptions during that period, unless the pharmacy has obtained a waiver or permission to delay reporting to the board. (2.) Permits a pharmacist-intern or a pharmacy technician trainee, acting at the direction of a pharmacist, who is inquiring about a recent Schedule II, III, IV or V prescription history of a particular patient of the pharmacist, to access the PMP database. (3.) Also allows a practitioner to access the PMP database to inquire about the prescribing activity of an individual to whom the practitioner has delegated prescribing authority. Also allows a person who is authorized to access information under Section 481.076 (a)(5), HSC to directly access the information available from other states pursuant to an interoperability agreement described by 481.076(j). (4.) Requires a wholesale distributor to report to the board the distribution of all Schedules II, III, IV, and V controlled substances by the distributor to a person in this state in the same format and with the same frequency as the information is reported to the Federal DEA. (5.) Allows the PMP Interagency Workgroup to meet when necessary as determined by the board. (6.) Allows a Class E pharmacy license or nonresident pharmacy licensee to process a prescription drug order for a patient, including a patient in this state or perform another pharmaceutical service, as defined by board rule. (7.) Repeals Canadian Pharmacy provisions in the Occupations Code never implemented due to constitutionality concern. Also, repeals Section 561.003(f), Occupations Code that prevents the license renewal of a pharmacy in Texas if a pharmacy owned by the same company is subject to disciplinary action in another state.	9-1-19
HB 3284	<b>SECTION 1. Closes</b> the Prescription Monitoring Program (PMP) Law Enforcement Information Portal currently at DPS and requires the TSBP to respond to law enforcement requests for prescribing/dispensing information from the PMP database. Also requires law enforcement to provide directly to TSBP a warrant, subpoena, or other court order compelling the disclosure of the prescribing/dispensing information. <b>Allows</b> a health care facility certified by the federal centers for Medicare and Medicaid Services to utilize information in the PMP. <b>Authorizes</b> a patient, a patient's parent or a patient's legal guardian to request a report of patient's PMP data and receive a record of the practitioners and pharmacists that have accessed the patient's data. Allows the TSBP to set a reasonable fee for the report. Requires the TSBP to adopt rules and create the form and set a fee. <b>SECTION 2.</b> Requires TSBP to make controlled substance wholesaler data reported under Section 481.0766(a), Health and Safety Code available to the Vet Board for inspections and investigations. <b>SECTION 3. Requires</b> the TSBP to create a PMP Advisory Committee and appoint members. <b>Requires</b> a regulatory agency that issues a license to a prescriber or a dispenser to update the administrative penalties or any applicable disciplinary guidelines concerning the penalties assessed by	9-1-19

BILL NUMBER	SUMMARY OF THE PROVISIONS OF THE BILL	EFFECTIVE DATE
	that agency for a person that uses or discloses PMP information in a manner not authorized by law and set the penalties in an amount sufficient to deter the conduct. <b>Creates</b> a new Class A Misdemeanor Criminal Offense: A person authorized to receive information under Section 481.076(a), Health and Safety Code commits an offense if the person discloses or uses the information in a manner not authorized by this subchapter or other law. <b>Creates</b> a new Class C Misdemeanor Criminal Offense: A person commits an offense if the person makes a material misrepresentation or fails to disclose a material fact in the request for information under Section 481.076(a-6) Health and Safety Code. <b>SECTION 5. Adopt</b> rules to administer new <u>Sections. 481.0767, 481.0768, and 481.0769.</u> <b>SECTION 6. Includes</b> new Sections of Subchapter C, Chapter 481 to violations included in Section 481.128(a), HSC. <b>SECTION 7. Creates</b> a new offense for Section 481.129(a)-knowingly possessing, obtaining, or attempting to obtain a controlled substance or an increased quantity of a controlled substance through the use of a fraudulent electronic prescription. <b>SECTION 9.</b> Adds additional grounds (Subchapter C, Chapter 481) for discipline regarding an applicant for or holder of nonresident Class E pharmacy license <b>SECTION 12.</b> Changes the "Mandatory PMP Look-up" start date from September 1, 2019 to March 1, 2020.	
HB 3285	<b>SECTION 5.</b> Requires the Statewide Behavioral Health Coordinating Council to incorporate into the statewide behavioral health strategic plan, strategies related to substance use disorders and treatment, developed in cooperation with the Texas Medical Board and State Board of Pharmacy. <b>SECTION 7.</b> Requires prescribers or dispensers of opioids to annually attend at least one hour of continuing education (CE) covering best practices, alternative treatment options, and multi-modal approaches to pain management which may include physical therapy, psychotherapy, and other treatments, and requires TSBP to adopt rules to establish the content of the CE. The subsection expires 8-31-23. <b>SECTION 11.</b> Requires TSBP to encourage pharmacists to participate in a program that provides a comprehensive approach to delivering early intervention and treatment services for persons with or at risk for substance use disorders.	9-1-19
HB 3496	(1.) Requires certain applicants for a pharmacy license (not B or C) to fill out and submit a sworn disclosure statement. Publicly traded companies or pharmacies wholly owned by a retail grocery store chain are exempted from the requirement to submit a sworn disclosure form. The board may impose an administrative penalty on an applicant who fails to submit a sworn disclosure statement. The application form must also include a notice that a surety bond may be required under Section 565.0551, Occupations Code. (2.) A surety bond may be required on decision of the Executive Director. The board may use a surety bond to secure the payment of a fine, fee, or penalty imposed on the pharmacy, or costs incurred in conducting an investigation of the pharmacy for failing to engage in business or engaging in fraud, deceit, or misrepresentation. (3.) Requires TSBP to notify a pharmacy that has ceased to operate for a period of 30 days or more that its license will be revoked and inform the license holder of the right to a hearing to contest the revocation. (4.) Allows the board may discipline an applicant or the holder of a pharmacy license if the board finds that the applicant or the license holder engaged in fraud, deceit, or misrepresentation as defined by board rule in dispensing drugs for nontherapeutic purposes.	1-1-20
SB 37	Eliminates a state agency's authority to deny revoke suspend or fail to renew a professional license due to the licensee or applicant being in default on a student loan.	Immediate Effect
SB 670	Adds a "Federally Qualified Health Center" (FQHC) as defined by 42 U.S.C. Section 1396d(1)(2)(B) to the types of health facilities at which a telepharmacy system may be located and permits a telepharmacy system at a FQHC to be located in a community in which a Class A or Class C pharmacy	9-1-19

<b>BILL NUMBER</b>	<b>SUMMARY OF THE PROVISIONS OF THE BILL</b>	<b>EFFECTIVE DATE</b>
	is located as determined by board rule. This act takes effect September 1, 2019.	
<b>SB 683</b>	Same pharmacy clean-up provisions as HB 2847, and in addition to HB 3496, requires TSBP to notify a pharmacy that has ceased to operate for a period of 30 days or more that its license will be revoked and inform the license holder of the right to a hearing to contest the revocation.	9-1-19
<b>SB 1056</b>	Clarifies that a physician may delegate to any properly qualified and trained pharmacist the implementation and modification of a patient's drug therapy under protocol, ensuring that pharmacists may now enter into collaborative practice agreements with physicians for their patients and establish protocols to make changes to a patient's drug therapy regimen. The pharmacist must maintain a copy of the protocol for inspection until at least the seventh anniversary of the expiration date of the protocol. Requires TSBP to adopt rules no later than December 1, 2019.	9-1-19
<b>SB 1200</b>	Despite any other law, requires a state licensing agency to recognize an out-of-state license of a military spouse and authorize the spouse to engage in the occupation if the spouse is currently licensed in good standing by another jurisdiction that has licensing requirements that are substantially equivalent to the requirements for the license in this state. License is good for 3 years only. No renewal. Adopt rules to implement the bill's provisions not later than December 1, 2019.	9-1-19
<b>SB 1217</b>	Prohibits licensing boards from considering an arrest that did not result in the person's conviction or placement on deferred adjudication community supervision in determining an applicant's eligibility for an occupational license.	Immediate Effect
<b>SB 1564</b>	States that a prescriber or dispenser is not subject to the requirements of Section 481.0764(a) HSC (Prescription Monitoring Program Look-up), before prescribing or dispensing opioids, benzodiazepines, barbiturates or carisoprodol if a patient is noted to be diagnosed with sickle cell disease. Applies only to a prescription issued on or after 6-10-19.	Immediate Effect

Performance Measure		FY2019 Projected Performance	FY2019 Performance Attained	Projected Target Met?*
<b>A. GOAL: MAINTAIN STANDARDS</b>				
Outcome (Results/Impact)				
	Percent of Licensees with No Recent Violations	95.00%	96.80%	Exceeded
	Percent of Licensees Who Renew Online	96.00%	91.48%	Met
<b>A.1.1 STRATEGY: LICENSING</b>				
Output (Volume)				
	Number of New Licenses Issued to Individuals	1,800	2,232	Exceeded
	Number of Licenses Renewed (Individuals)	16,650	19,159	Exceeded
Explanatory				
	Total Number of Business Facilities Licensed	8,300	8,210	Met
<b>B. GOAL: ENFORCE REGULATIONS</b>				
Outcome (Results/Impact)				
	Percent of Jurisdictional Complaints Resulting in Disciplinary Action	10.00%	7.63%	Not Met
<b>B.1.1 STRATEGY: ENFORCEMENT</b>				
Output (Volume)				
	Number of Jurisdictional Complaints Resolved	5,360	5,694	Exceeded
Efficiencies				
	Average Time for Jurisdictional Complaint Resolution	195	149	Exceeded
Explanatory				
	Number of Jurisdictional Complaints Received	5,620	5,618	Met
<b>B.1.2. STRATEGY: PEER ASSISTANT</b>				
Output (Volume)				
	Number of Licensed Individuals Participating in a Peer Assistant Program	160	146	Not Met

<b>Date</b>	<b>Presentation/Group/Location</b>	<b>Number of Attendees</b>
9/11/2018	Regulating the Practice of Pharmacy in the Public's Interest Pasadena Civic Association, Pasadena, TX	20
9/14/2018	Regulating Pharmacy Technicians Westlake High School Health Careers Class, Austin	10
9/19/2018	Communication and TSBP University of Texas College of Pharmacy P2 Class, Austin	120
9/22/2018	Texas Pharmacy Laws and Rules Update Texas Oncology Pharmacists, Dallas	75
9/26 & 9/28/2018	Texas Pharmacy Laws and Rules Update H-E-B Pharmacists Conference, San Antonio	700
9/28/2018	Texas Prescription Monitoring Program DEA Conference, Austin	70
9/28/2018	Texas Pharmacy Laws and Rules Update University of Texas Pharmacy Practice Seminar, Austin	475
10/4/2018	Texas Pharmacy Laws and Rules Update St. David's Pharmacy Directors' Meeting, Austin	20
10/20/2018	Texas Pharmacy Laws and Rules Update Austin Area Society of Health System Pharmacists, Round Rock	50
10/23/2018	Texas Pharmacy Laws and Rules Update Texas Federation of Drug Stores Meeting, Austin	30
10/26/2018	Texas Prescription Monitoring Program Texas Hospital Association Meeting, Austin	40
11/9/2018	Prescription Monitoring Program: A CommUNITY Commitment to Mental Health Education and Advocacy New Braunfels	25
11/12/2018	University of Texas College of Pharmacy Legislative Panel University of Texas, Austin	20
2/9/2019	2 <sup>nd</sup> Annual Opioid & Pain Management Conference Texas A&M College of Pharmacy, Corpus Christi	100
2/12/2019	Regulating the Practice of Pharmacy Walgreens Supervisors, Austin	20
2/20/2019	Regulating the Practice of Pharmacy in the Public Interest SNPhA at University of Texas at Tyler, Tyler	35
4/14/2019	Texas Pharmacy Laws and Rules Update Texas Society of Health-System Pharmacists Annual Meeting, Frisco	200
4/26/2019	Houston Medication Safety Symposium Houston	180
5/2/2019	Texas Pharmacy Laws/Rules Update Dallas Area Pharmacy Association, Coppell	55
5/15/2019	Disrupting Diversion: Do You Know Where Your Drugs are Going? Healthcare Executive Forum, Houston	20
6/8/2019	Texas Pharmacy Laws & Rules Update Texas Chapter American Society of Consultant Pharmacists, Houston	55



<b>Date</b>	<b>Presentation/Group/Location</b>	<b>Number of Attendees</b>
6/14/2019	Texas Pharmacy Laws & Rules Update University of Texas Hospital Pharmacy Practice Seminar, Austin	110
8/2/2019	Texas Pharmacy Laws and Rules Update Texas Pharmacy Association Annual Meeting, Irving	210
8/22/2019	Regulating the Practice of Pharmacy, University of Texas College of Pharmacy New Students	125
8/28/2019	Texas Pharmacy Laws and Rules Update Webinar Texas Association of Community Health Centers, Austin	40
<b>TOTAL</b>		<b>2,805</b>

<b>Date</b>	<b>Interview</b>
9/4/2018	Telephone Interview – BuzzFeed
9/26/2018	Telephone Interview – WFAA, Dallas
10/3/2018	On-camera Interview – KXAN, Austin
10/29/2018	Telephone Interview – Texas Tribune
11/5/2018	Telephone Interview – Dallas Morning News
11/7/2018	Telephone Interview – Everyday Health
11/9/2018	Telephone Interview – KXAN Austin
11/19/2018	Telephone Interview – BuzzFeed
12/7/2018	Telephone Interview – Dallas Morning News
12/11/2018	Telephone Interview – Dallas Morning News
1/14/2019	Telephone Interview – News 4, San Antonio
1/17/2019	On-Camera Interview – WFAA, Dallas
1/29/2019	Telephone Interview – CBS, Austin
2/4/2019	Telephone Interview – NBC-5, Dallas/Fort Worth
3/4/2019	Telephone Interview – Telemundo/NBC 39, Dallas
4/16/2019	Telephone Interview – Dallas Morning News
4/23/2019	On Camera Interview – KVUE, Austin
5/2/2019	Telephone Interview – Houston Chronicle
5/14/2019	Telephone Interview – Austin American-Statesman
6/13/2019	Telephone Interview – Houston Chronicle
7/2/2019	Telephone Interview – Telemundo/Dallas
7/22/2019	On-Camera Interview – KVUE, Austin
7/30/2019	Telephone Interview – New York Times
8/14/2019	Telephone Interview – Dallas Morning News
8/26/2019	On Camera Interview – KVUE, Austin
8/26/2019	Telephone Interview – NBC News
8/29/2019	Telephone Interview – CBS “The Doctors”

<b>Date</b>	<b>Activity</b>
9/5/2018	Outstanding Women in Texas Government Luncheon
9/10/2018	Meeting with Department of State Health Services
9/24/2018	Conference call with National Association of Chain Drug Stores
9/24/2018	Meeting with Sunset and Senate staff
9/27/2018	Texas Pharmacy Summit
10/2/2018	Meeting with Office of Inspector General
10/3/2018	Meeting with Attorney General's Office
10/23/2018	Meeting with Texas Pharmacy Association and Texas Society of Health-System Pharmacists
10/28/2018	Texas Pharmacy Summit
10/30/2018	State Agency CEO meeting
10/30/2018	Pharmacy Advocacy Training Day at the Capitol
10/30/2018	Conference call with American Pharmacists Association
10/31/2018	Meeting with Governor's office staff
11/7/2018	Conference call with PMPi Subcommittee
11/13/2018	Pharmacy Practice Coalition
11/15/2018	Symposium on Ethics for Texas State Agencies
11/28/2018	Meeting with University of Texas Center for Health Communication
11/29/2018	Meeting with Texas Veterinary Medical Association
12/7/2018	HHSC Health IT Strategic Plan Meeting
12/7/2018	Conference call with PMPi Subcommittee
12/14/2018	Telephone call with Rep Paul's Office
12/14/2018	Meeting with Comptroller's Office
12/18/2018	Telephone call with Rep. Martinez's office
12/20/2018	2019 TELICON Legislative Seminar
1/9/2019	Telephone call with Governor's Office
1/14/2019	Telephone call with Rep. Raymond's Office
1/16/2019	Meeting with E-Strategies
1/18/2019	Meeting with Department of State Health Services
1/22/2019	Conference call with Prescription Drug Monitoring Program Training and Technical Assistance Center
1/23/2019	Meeting with Department of State Health Services
1/14/2019	Telephone call with Texas Society of Health-System Pharmacists
1/24/2019	Conference call with National Association of Chain Drug Stores
1/26/2019	Pharmacy Day at the Capitol

<b>Date</b>	<b>Activity</b>
1/29/2019	Meeting with Legislative Budget Board
2/12/2019	Meeting with Internal Auditor
3/5/2019	Meeting with Texas Pain Society
3/27/2019	Meeting with Department of State Health Services
4/3-4/2019	University of Texas College of Pharmacy Advisory Council Meeting
5/20/2019	Telephone call with Rep. Lozano's office
5/31/2019	Telephone call with Drug Enforcement Administration
6/5/2019	Telephone call with Rep. Zedler's office
6/6/2019	Meeting with University of Texas Center for Health Communication
6/11/2019	Telephone call with Rep. Swanson's office
6/13/2019	Meeting with State Office of Risk Management
7/1/2019	Conference call with Prescription Drug Monitoring Program Training and Technical Assistance Center
7/9/2019	Telephone call with Rep. Perez's office
7/11/2019	Meeting with Appriss Health
7/11/2019	Telephone call with Rep. Collin's office
7/24/2019	Meeting with National Association of Boards of Pharmacy
7/26/2019	Conference call with New York Board of Pharmacy
7/29/2019	Meeting with University of Texas Center for Health Communications
7/29/2019	Telephone call with Rep. Bucy's office
8/1/2019	Telephone call with Rep. Longoria's office

Date	Name of Association/Location of Meeting
9/6-7/2018	Multistate Pharmacy Jurisprudence Examination Item Review NABP Headquarters, Mt. Prospect, IL
10/8-10/2018	NABP Task Force to Develop Regulations Based on Standards of Care NABP Headquarters, Mt. Prospect, IL
10/14-16/2018	NABP District VI Meeting Kansas City, MO
11/1-4/2018	American Society for Pharmacy Law Annual Meeting Hilton Head, SC
4/12-14/2019	Texas Society of Health-System Pharmacists Annual Meeting Frisco
5/16-18/2019	NABP Annual Meeting Minneapolis, MN
6/26-27/2019	Bureau of Justice Training and Technical Assistance PMP Meeting Washington, DC
8/1-4/2019	Texas Pharmacy Association Annual Meeting Irving

### Inspections

Total Inspections by Type/Disposition	FY2017	FY2018	FY2019	% of FY2019	3 Year Average	% of 3 Year Average
Inspections	2,784	3,055	2,733	83%	2,920	87%
Pre-Inspections	160	192	201	6%	176	5%
Partial-Inspections	147	151	117	4%	149	4%
Inspection-Visits	17	16	17	1%	17	0%
Attempted Inspections	110	124	202	6%	117	3%
Other	9	15	12	0%	12	0%
<b>Total</b>	<b>3,227</b>	<b>3,553</b>	<b>3,282</b>	<b>100%</b>	<b>3,354</b>	<b>100%</b>

The term “inspections” includes inspections, pre-inspections, partial-inspections, and inspection-visits. These terms are described below:

- A. Inspections are full inspections of licensed facilities in which Compliance field staff check the facilities for compliance with each of the items on the inspection report form.
- B. Pre-Inspections are partial inspections that occur prior to TSBP issuing the pharmacy license. The Compliance field staff determines if the pharmacy has the necessary items to open and operate a pharmacy in compliance with the laws and rules governing the practice of pharmacy. A pharmacy license is not issued to the facility unless the facility can pass the pre-inspection process.
- C. Partial-Inspections are inspections of licensed facilities in which Compliance field staff check the facility for compliance with a portion of the items on the inspection report form. In addition, partial inspections include follow-up inspections of pharmacies that received a “Warning Notice” to determine if the pharmacies have corrected the discrepancies listed on the “Warning Notice.” Follow-up inspections are conducted within approximately six to eight months after the pharmacy has notified the Board in writing that the discrepancies have been corrected.
- D. Inspection-Visits are inspections in which Compliance field staff generally do not complete an inspection report form. Inspection-visits include inspections of non-licensed facilities that are operating a pharmacy, visits made to pharmacies that have closed (and did not notify the Board), and visits to “new” pharmacies that have not opened for business. The last two situations are discovered by Compliance field staff after arriving at the addresses listed in TSBP records.

<b>Number of Inspections/Visits by Class</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>	<b>% of FY2019</b>	<b>3 Year Average</b>
Class A Pharmacies	2,238	2,448	2,225	68%	2,304
Class A-S Pharmacies	199	206	179	5%	195
Class B Pharmacies	16	15	20	1%	17
Class C Pharmacies	257	277	304	9%	279
Class C-S Pharmacies	241	267	228	7%	245
Class D Pharmacies	120	195	170	5%	162
Class F Pharmacies	141	133	131	4%	135
Class G Pharmacies	15	12	24	1%	17
Class H Pharmacies	0	0	1	0%	0
<b>Total</b>	<b>3,227</b>	<b>3,553</b>	<b>3,282</b>	<b>100%</b>	<b>3,354</b>

**COM-01 continued**

<b>Purpose of Inspection-Inspection Type (In Order of Priority)</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>	<b>% of FY2019</b>	<b>3-Yr. Avg.</b>
Complaint	34	86	2	0%	41
Follow-up to Disciplinary Order	5	5	1	0%	4
Pre-Inspection New	160	194	194	6%	183
New Pharmacies	176	231	240	7%	216
Change of Ownership	75	38	37	1%	50
Preceptor	3	2	1	0%	2
Follow-up to "Warning Notice"	80	99	73	2%	84
Routine Inspections	2,451	2,603	2,385	73%	2,480
Rank Change	11	15	12	0%	13
Reverse Rank Change	2	1	2	0%	2
Licensee Request	24	41	54	2%	40
Sterile Compounding (High Risk)	19	22	10	0%	17
Theft and Loss	8	7	1	0%	5
Other	179	209	270	8%	219
<b>Total</b>	<b>3,227</b>	<b>3,553</b>	<b>3,282</b>	<b>100%</b>	<b>3,354</b>

## Warning Notices

Number of Warning Notices* Issued by Class	FY2017	FY2018	FY2019	% of FY2019	3 Year Average
Class A Pharmacies	796	819	1,645	57%	1,087
Class A-S Pharmacies	129	104	504	17%	246
Class B Pharmacies	9	7	38	1%	18
Class C Pharmacies	52	33	81	3%	55
Class C-S Pharmacies	177	132	519	18%	276
Class D Pharmacies	19	25	45	2%	30
Class F Pharmacies	14	12	41	1%	22
Class G Pharmacies	4	4	15	1%	8
Class H Pharmacies	0	0	1	0%	0.33
<b>Total</b>	<b>1,200</b>	<b>1,136</b>	<b>2,889</b>	<b>100%</b>	<b>1,742</b>

\* A pharmacy may be issued a "Warning Notice" for non-compliance with more than one condition.

Conditions Receiving Warning Notices					
Percentages are based on the total number of Warning Notices issued to Pharmacies in FY2019. Note - Pharmacies may be issued a Warning Notice for non-compliance with more than one condition.					
Type of Violation	FY2017	FY2018	FY2019	% FY2019	3 Year Average
<b>Equipment</b>	<b>115</b>	<b>69</b>	<b>59</b>	<b>2%</b>	<b>81</b>
Balance Failed Inspection	69	47	41		52
Equipment Inspection Due	44	19	17		27
Insufficient Equipment	2	3	1		2
<b>Pharmacy Technicians</b>	<b>405</b>	<b>335</b>	<b>270</b>	<b>10%</b>	<b>337</b>
No/Incomplete Training	336	297	196		276
No/Improper Supervision	32	24	61		39
Improper Registration	32	8	9		16
Supportive Personnel Name Tags	5	6	4		5
<b>Inadequate Library</b>	<b>91</b>	<b>100</b>	<b>44</b>	<b>2%</b>	<b>78</b>
<b>Counseling Area</b>	<b>0</b>	<b>11</b>	<b>2</b>	<b>0%</b>	<b>4</b>
<b>Licenses</b>	<b>85</b>	<b>78</b>	<b>63</b>	<b>2%</b>	<b>75</b>
Licenses Not Posted	85	74	56		72
Delinquent Licenses	0	4	7		4
<b>Prescriptions</b>	<b>269</b>	<b>252</b>	<b>210</b>	<b>7%</b>	<b>244</b>
Lack Proper Information	133	125	113		124
Prescription Label Incorrect	96	95	79		90
Non-Emergency CII	1	0	0		0
Triplicate Non-Compliance	39	32	18		30
<b>Drug Stock/Environment</b>	<b>242</b>	<b>244</b>	<b>198</b>	<b>7%</b>	<b>228</b>
Improper Environment	67	78	61		69
Out-of-Date Drug Stock	68	61	27		52
Security	60	66	67		64
Unsanitary/ Orderly/ Clean	33	30	29		31



**COM-02 continued**

Type of Violation	FY2017	FY2018	FY2019	% FY2019	3 Year Average
Improper Drug Storage/ Refrigerator Temp Log	6	5	8		6
Area for Non-Sterile Compounding	4	1	4		3
Violation of Limited Formulary	3	2	2		2
Prohibited Drugs (Class D)	1	1	0		1
<b>Inventory</b>	<b>170</b>	<b>164</b>	<b>148</b>	<b>5%</b>	<b>161</b>
No Annual Inventory	55	55	64		58
No Change of Ownership Inventory	6	4	9		6
No Change of PIC Inventory	30	31	23		28
Incomplete Inventory	77	68	46		64
No Perpetual inventory (Class C)	1	2	2		2
Improper Drug Destruction	1	4	4		3
<b>Improper Prepackaging Procedures</b>	<b>45</b>	<b>31</b>	<b>24</b>	<b>1%</b>	<b>33</b>
<b>Computer Systems</b>	<b>108</b>	<b>117</b>	<b>84</b>	<b>3%</b>	<b>103</b>
Computer Records Incomplete	107	116	80		101
Computer Records/ System Non-Compliance	1	1	4		2
<b>Records</b>	<b>324</b>	<b>398</b>	<b>304</b>	<b>11%</b>	<b>342</b>
Records Not Available	191	256	160		202
DEA Order Forms Incomplete	0	0	0		0
Absence of R.Ph. Record	7	10	8		8
Rx Not Separated	13	6	7		9
Rx Records not Numerical Order	18	9	14		14
Improper Transfer of RX	7	0	14		7
Invoices Not Separated/Retrievable/ Dated & Initialed	59	64	51		58
No Complaint Notification	28	41	42		37
RPh visits/ contact documentation	0	10	4		5
Improper Refill Documentation-CIII-CV over 5X/6 Mo.	1	2	4		2
<b>OBRA Violations</b>	<b>106</b>	<b>108</b>	<b>81</b>	<b>3%</b>	<b>98</b>
Written Information Not Provided	46	59	39		48
No Patient Counseling	56	45	31		44
PMR Absent or Incomplete	4	4	11		6
<b>Sterile Pharmaceutical Violations</b>	<b>1,782</b>	<b>1,058</b>	<b>941</b>	<b>34%</b>	<b>1,260</b>
No/Incomplete QA/QC	116	22	13		50
No/Incomplete P&P Manual	128	111	70		103
No/Inadequate Preparation Area	6	0	1		2
IV Preparation	2	1	1		1
No Drug Regimen Review	10	13	9		11
Cytotoxic/Bio Procedures	0	0	0		0
Anteroom air is not ISO 8	19	4	4		9
Buffer area is NOT ISO 7	17	3	7		9
No Separate buffer room for high-risk CSPs	2	1	0		1
Buffer area not free of water source	1	1	1		1
Improper design for hands free access	14	1	6		7
Clean room not clean/ well-lit/ particle free	73	30	38		47

**COM-02 continued**

Type of Violation	FY2017	FY2018	FY2019	% FY2019	3 Year Average
Clean room not solely used for CSP	8	3	4		5
Improper floor covering in clean room	9	5	6		7
Surfaces not smooth/ impervious/ crevice-free	131	83	107		107
Anteroom sink not hands free/hot&cold/closed system of soap	21	4	7		11
Improper room temperature in clean room	79	80	73		77
Drugs/ supplies stored on floor of clean room	7	7	8		7
Clean room contains inappropriate supplies	19	10	7		12
PEC does not maintain ISO 5	6	2	1		3
Improper location of PEC	0	3	2		2
Untimely certification of PEC	9	8	9		9
Improper procedures for PEC prefilters	3	5	2		3
Improper pressure differential for PEC	5	4	2		4
No pressure gauge in clean room	21	21	10		17
Improper documentation of pressure monitoring	33	19	13		22
Insufficient training for RPH	55	37	30		41
Insufficient training for Tech	42	35	25		34
Improper testing prior to compounding	106	64	51		74
Improper testing after failure	0	1	0		
Untimely evaluation/ testing	99	56	57		71
Improper testing for all types of CSPs	0	1	0		
Inadequate Library: Injectables	10	8	8		9
Inadequate Library: Specialty reference	1	1	1		1
Inadequate Library: USP	34	20	25		26
Dispensing commercially available	3	4	0		2
No written agreement with DR	2	0	7		3
QC Procedures not followed	1	6	4		0
RPh not available at all times	3	2	1		2
No thermometer in refrigerator	4	9	2		5
Inadequate supplies for aseptic mixing	29	17	3		16
Improper equipment for CSP	0	0	21		7
Inadequate cleaning solutions	16	10	5		10
Inadequate handwashing agents	0	0	1		0
No lint-free wipes	7	1	1		3
Inadequate gowns/ garb	6	7	15		9
Improper calibration of automated cpd device	5	9	2		5
Improper SOP: Facility	0	4	3		2
Improper SOP: Accuracy checks	0	9	5		5
Improper SOP: QA	0	0	21		7
Improper SOP: Prep Recall	0	18	15		11
Personnel: Cosmetics	12	5	5		7
Personnel: Jewelry	23	7	7		12
Personnel: Artificial nails	8	0	1		3

**COM-02 continued**

Type of Violation	FY2017	FY2018	FY2019	% FY2019	3 Year Average
Personnel: Shoe covers	36	1	0		12
Hygeine of nails	33	15	12		20
Improper hand washing	23	6	4		11
Improper gowning	12	7	2		7
Improper drying	12	3	5		7
Failure to use alcohol-based scrub	63	30	47		47
Failure to use sterile alcohol	5	3	2		3
Failure to conduct accuracy checks	47	11	8		22
Improper label: Generic name	1	1	0		1
Improper label: CSP statement	2	1	2		2
Improper Labeling: Lot #	1	0	0		0
Improper Labeling: Qty	1	0	0		0
Improper Labeling: Ancillary	1	0	0		0
Improper BUD	2	4	0		2
Improper cleaning: Start of day	13	0	0		4
Improper mopping	23	15	8		15
Improper Cleaning: walls/ ceiling	28	22	11		20
Improper Cleaning: Supplies	5	2	1		3
Improper doc of cleaning	47	33	26		35
Cleaning by untrained personnel	17	11	7		12
High Risk: Improper testing of batches	1	0	3		1
High Risk: Improper cleaning	3	1	0		1
High Risk: Improper sterilization	1	0	1		1
High Risk: Improper pre-sterilization	5	5	2		4
High Risk: Improper re-entry	0	3	4		2
Hazardous Prep: Improper apparel	0	1	0		0
Hazardous Prep: Improper disposal	0	1	0		0
Hazardous Prep: Improper hood	5	0	1		2
Hazardous Prep: Improper pressure	4	0	1		2
Hazardous Prep: Improper pressure monitor	2	0	0		1
Hasardous Prep: Low volume noncompliance	1	0	2		1
Hazardous Prep: Improper storage	1	0	0		0
Failed to keep records	13	6	3		7
Improper Record: Date	12	3	2		6
Improper Record: Formula	12	1	3		5
Improper Record: Compounder initials	17	11	6		11
Improper Record: Initials of final checker	23	11	8		14
Improper Record: Container used	16	5	2		8
Improper Record: Qty	11	1	2		5
Improper Record: BUD	20	12	9		14
Improper Record: QC	17	6	4		9
Incomplete master worksheets	10	3	2		5
Worksheet not approved by RPh	5	3	2		3
Failure to review records	0	8	6		5
Inappropriate sampling plan	1	27	17		15

## COM-02 continued

Type of Violation	FY2017	FY2018	FY2019	% FY2019	3 Year Average
Air environment evaluation by untrained staff	5	10	4		6
Untimely air sampling	20	3	5		9
<b>No/Incomplete Non-Sterile Cpd Records</b>	<b>105</b>	<b>151</b>	<b>87</b>	<b>3%</b>	<b>114</b>
<b>Improper Distribution</b>	<b>32</b>	<b>32</b>	<b>28</b>	<b>1%</b>	<b>31</b>
<b>No PIC</b>	<b>23</b>	<b>30</b>	<b>25</b>	<b>1%</b>	<b>26</b>
<b>Dispensing</b>	<b>110</b>	<b>132</b>	<b>83</b>	<b>3%</b>	<b>108</b>
Improper Dispensing/ Corresponding Responsibility	62	83	51		74
Aiding and Abetting	5	2	3		3
Illegal Dispensing	6	5	0		4
Substitution Non-Compliance	2	1	1		1
Out-of-State Rx's for Controlled Substances	0	0	2		1
Improper Emergency Room Dispensing	2	1	0		1
Improper Automated Dispensing Procedures	31	36	23		30
Improper Provision	2	4	3		3
<b>Improper Advertising</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0%</b>	<b>0</b>
<b>Notification Violation</b>	<b>149</b>	<b>131</b>	<b>129</b>	<b>5%</b>	<b>136</b>
<b>Theft &amp; Loss of C/S Not Reported</b>	<b>25</b>	<b>23</b>	<b>12</b>	<b>0%</b>	<b>20</b>
<b>Gray Market diversion/ Samples</b>	<b>0</b>	<b>2</b>	<b>1</b>	<b>0%</b>	<b>1</b>
<b>Improper Closing/Change of Ownership</b>	<b>1</b>	<b>3</b>	<b>7</b>	<b>0%</b>	<b>4</b>
<b>Improper Inpatient Records (Class C)</b>	<b>7</b>	<b>6</b>	<b>4</b>	<b>0%</b>	<b>6</b>
			<b>2,804</b>	<b>100%</b>	<b>3,769</b>

## COM-03

### SUMMARY OF RANDOM COMPOUNDED SAMPLE TESTING PROGRAM IN NON-RESIDENT CLASS E-S PHARMACIES

	FY2017	FY2018	FY2019
<b>Total Number of Samples Tested</b>	<b>91</b>	<b>72</b>	<b>68</b>
<b>Number of Non-Sterile Samples Tested</b>	<b>5</b>	<b>1</b>	<b>0</b>
<i>Number of Potency Failures</i>	0	1	3
<b>Number of Sterile Samples Tested</b>	<b>86</b>	<b>71</b>	<b>68</b>
<i>Number of Potency Failures</i>	12	6	3
<i>Number of Sterility Failures</i>	1	0	0
<i>Number of Fungal Failures</i>	0	0	0
<i>Number of Endotoxin Failures</i>	0	0	0

**COM-04****Applications**

<b>Activity</b>	<b>FY 2017</b>	<b>FY 2018</b>	<b>FY 2019</b>	<b>3 Year Average</b>
New Class D (Clinic) Pharmacy Applications and Change of Ownership Applications	25	11	31	22
New Class B (Nuclear) Pharmacy Applications	0	0	1	0
Petitions for Expanded Formularies for Class D (Clinic) Pharmacies (New Petitions and Renewal Applications)	88	87	85	87
Petitions for Alternative Visitation Schedules for Class D (Clinic) Pharmacies	49	122	30	67
Notifications of Temporary Locations for Class D (Clinic) Pharmacies	13	14	14	14
Standard Class D Formularies Reviewed	11	10	15	12

**COM-05****Presentations**

<b>Date</b>	<b>Presentation</b>	<b>Attendance (approx.)</b>	<b>Staff Presenter</b>
9/18/2018	TSBP Quarterly Staff Meeting	90	Ben Santana
11/13/2018	The University of Texas at Austin College of Pharmacy P3 Students (Austin)	75	Ben Santana
5/7/2019	Texas State Board of Pharmacy May Business Meeting (Austin)	90	Ben Santana
5/14/2019	Texas Jail Association Annual Conference (Austin)	40	Ben Santana
10/13/2018	TSUCOPHS Annual Fall Preceptors Conference (Houston)	162	Iona Grant
10/24/2018	North Houston Pharmacy Assoc (Conroe)	31	Iona Grant
1/22/2019	Lake Houston Pharmacy Assoc Law (Humble)	69	Iona Grant
1/31/2019	Houston Area Pharmacy Association (Houston)	60	Iona Grant
2/23/2019	Texas Assoc Independent Pharmacy Owners (Houston)	80	Iona Grant
3/2/2019	TSUCOPHS Spring Preceptors Conf Law and Opioid (Houston)	120	Iona Grant
4/15/2019	U of H Class C Presentation (Houston)	75	Iona Grant
5/4/2019	Nigerian Pharmacist Organization (Houston)	41	Iona Grant
8/18/2019	lake Houston Pharmacy Assoc Opioid (Humble)	40	Iona Grant
9/25/2018	Substance Use Prevention Coalition of Collin County (McKinney)	75	Terri Burroughs
10/27/2018	South Plains Pharmacy Symposium (Lubbock)	40	Terri Burroughs
2/27/2019	TSBP General Staff Meeting (Austin)	90	Terri Burroughs
3/2/2019	West Texas Pharmacy Association Annual Conference (San Angelo)	80	Terri Burroughs
3/23/2019	El Paso Area Society of Health System Pharmacists Annual Seminar (El Paso)	25	Terri Burroughs
3/27/2019	TSBP Online Webinar	21	Terri Burroughs

**COM-05 continued**

<b>Date</b>	<b>Presentation</b>	<b>Attendance (approx.)</b>	<b>Staff Presenter</b>
4/13/2019	Texas Society of Health System Pharmacists Annual Seminar (Frisco)	200	Terri Burroughs
6/4/2019	West Texas Society of Health System Pharmacists (Rowena)	14	Terri Burroughs
6/5/2019	Hendrick Medical Center Pharmacy Staff (Abilene)	35	Terri Burroughs
6/8/2019	UNT Annual Preceptor Conclave (Fort Worth)	120	Terri Burroughs
6/18/2019	TSBP Online Webinar	22	Terri Burroughs
9/25/2018	Substance Use Prevention Coalition of Collin County (McKinney)	75	Terri Burroughs
9/14/2018	Greater Houston Dental Society (Houston)	30	Kathy Salinas
10/25/2018	The Houston Program PGY1 Pharmacy Residents (Houston)	12	Kathy Salinas
9/25/2018	Substance Use Prevention Coalition Collin County (McKinney)	75	Kathy Salinas
10/27/2018	South Plains Pharmacy Symposium (Lubbock)	40	Kathy Salinas
11/28/2018	Texas A&M Faculty & Students (Houston)	90	Kathy Salinas
2/11/2019	Gulf Coast Society of Health System Pharmacists (GCSHP)	34	Kathy Salinas
3/31/2019	Vietnamese-American Pharmacists Association – VAPhA (Stafford)	50	Kathy Salinas
4/18/2019	Gulf Coast Pharmacy Association (Houston)	32	Kathy Salinas
5/22/2019	HCA Pharmacy Summit (Houston)	50	Kathy Salinas
6/20/2019	Vietnamese-American Pharmacists Association – VAPhA (Houston)	40	Kathy Salinas
8/1/2019	Oncology Consultants (Houston)	7	Kathy Salinas
8/17/2019	DEA Seminar (Edinburgh)	150	Jim Clark
8/22/2019	Bexar County Area Hospital Pharmacy Directors Meeting (San Antonio)	40	Jim Clark
9/12/2018	TSBP Laws and Rules Update - Webinar	97	Synthia Hill
10/10/2018	TSBP Laws and Rules Update - Webinar	67	Synthia Hill
3/12/2019	TSBP Laws and Rules Update - Webinar	94	Synthia Hill
5/22/2019	TSBP Laws and Rules Update - Webinar	113	Synthia Hill
7/17/2019	TSBP Laws and Rules Update -Webinar	171	Synthia Hill
8/19/2019	TSBP Class E-S Vendor Inspector Update – Webinar	14	Synthia Hill
8/19/2019	TSBP Class E-S New Vendor Inspector Training -Webinar	9	Synthia Hill
11/18/2019	TSBP Laws and Rules Update - Webinar	103	Tera McConnell
12/18/2019	TSBP Laws and Rules Update - Webinar	100	Tera McConnell
1/19/2019	TSBP Laws and Rules Update - Webinar	100	Tera McConnell
4/19/2019	TSBP Laws and Rules Update - Webinar	134	Tera McConnell
6/19/2019	TSBP Laws and Rules Update - Webinar	82	Tera McConnell
8/19/2019	TSBP Laws and Rules Update - Webinar	205	Tera McConnell
8/19/2019	TSBP Class E-S New Vendor Inspector Training -Webinar	9	Tera McConnell
8/19/2019	TSBP Class E-S Vendor Inspector Update - Webinar	14	Tera McConnell
<b>Total</b>	<b>53</b>	<b>3,732</b>	

**PMP-01**

	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>
<b>Registered Users</b>	54,346	92,232	116,458
<b>Number of Searches</b>	4,085,605	8,143,304	12,567,013
<b>Prescription Dispensed</b>	29,532,294	39,592,102	38,159,456

<b>License Type of Registered Users</b>	<b>FY2018</b>	<b>FY2019</b>
<b>Advanced Practice Registered Nurse</b>	10,107	12,624
<b>Dentist</b>	8,596	10,461
<b>Medical Resident with Prescriptive Authority*</b>	324	415
<b>Optometrist</b>	625	755
<b>Pharmacist</b>	24,702	28,244
<b>Pharmacy Technician (Pharmacist Delegate) *</b>	2,663	4,929
<b>Physician (MD, DO)</b>	35,601	44,740
<b>Physician Assistant</b>	4,437	5,446
<b>Podiatrist</b>	442	599
<b>Prescriber Delegate*</b>	3,883	6,868
<b>Other Prescriber*</b>	256	336
<b>Veterinarian</b>	596	1,041
<b>Totals</b>	92,232	116,458

**PMP-02****Presentations**

<b>DATE</b>	<b>PRESENTATION</b>
09/17/2018	TSBP Compliance Staff Training
11/04/2018	Texas Pain Society Annual Conference, Bastrop
11/16/2018	Galveston Medical Society Meeting, Galveston
12/10/2018	PMP All Agency Investigator Training, Webinar
01/19/2019	DEA Seminar, Beaumont
02/08/2019	Texas Association of Physician Assistants Conference, Houston
04/18/2019	TSBP Pharmacist PMP Training, Webinar
05/02/2019	Texas Dental Association Meeting, San Antonio
07/25/2019	TSBP Pharmacist PMP Training, Webinar



# ADM-01

## TSBP Compared to Travis County Workforce Composition Based on 2010 Census Data

Texas State Board of Pharmacy EEO Data as of August 31, 2019

<b>Travis County</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	41,665	25,940	1,648	2,087	4,908	3,933	1,700	1,062	49,921	33,022	82,943
Professional	55,800	44,270	2,894	3,963	7,580	7,922	7,599	4,349	73,873	60,504	134,377
Para-Prof	13,780	14,310	2,750	3,164	9,120	11,213	1,251	1,588	26,901	30,275	57,176
Admin Support	15,635	39,810	2,735	5,705	6,114	14,289	1,222	2,578	25,706	62,382	88,088
TOTALS	126,880	124,330	10,027	14,919	27,722	37,357	11,772	9,577	176,401	186,183	362,584
Percentage	35.0%	34.3%	2.8%	4.1%	7.6%	10.3%	3.2%	2.6%	48.7%	51.3%	100.0%
<b>Agency EEO Data</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	0	3	0	0	0	0	1	0	0	3	3
Professional	7	11	1	3	4	1	0	1	12	16	28
Para-Prof	8	21	2	4	2	15	0	0	12	40	52
Admin Support	0	1	0	2	0	8	0	0	0	10	10
TOTALS	15	36	3	8	6	24	0	1	24	69	93
Agency	16.1%	38.7%	3.2%	8.6%	6.5%	25.8%	0.0%	1.1%	25.8%	74.2%	100.0%
Travis County	35.0%	34.3%	2.8%	4.2%	7.9%	10.6%	3.3%	2.7%	48.1%	51.9%	100.0%
<b>New Hires</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	0	0	0	0	0	0	0	0	0	0	0
Professional	1	2	0	0	1	0	0	0	2	2	4
Para-Prof	4	1	0	2	0	1	0	0	4	4	8
Admin Support	0	0	1	0	0	1	0	0	1	1	2
TOTALS	5	3	1	2	1	2	0	0	7	7	14
<b>Promotions</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	0	0	0	0	0	0	0	0	0	0	0
Professional	0	1	0	0	0	0	0	0	0	1	1
Para-Prof	1	1	1	0	0	2	0	0	2	3	5
Admin Support	0	1	0	0	0	0	0	0	0	1	1
TOTALS	1	3	1	0	0	2	0	0	2	5	7
<b>Terminations</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	0	0	0	0	0	0	1	0	1	0	1
Professional	1	2	0	1	1	2	0	0	2	5	7
Para-Prof	1	1	0	2	0	2	0	0	1	5	6
Admin Support	0	0	1	2	0	0	0	0	1	2	3
TOTALS	2	3	1	5	1	4	1	0	5	12	17
<b>Applications</b>	<b>WHITE</b>		<b>BLACK</b>		<b>HISPANIC</b>		<b>OTHER</b>		<b>TOTAL</b>		<b>GRAND</b>
	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	<b>M</b>	<b>F</b>	
Administrators	0	0	0	0	0	0	0	0	0	0	0
Professional	15	13	3	2	2	2	3	2	23	19	42
Para-Prof	39	46	7	36	32	41	6	10	84	133	217
Admin Support	1	18	2	6	3	17	3	5	9	46	55
TOTALS	55	77	12	44	37	60	12	17	116	198	314

### Required Reports

Report Title	Recipient(s)	Division Reporting
FTE State Employees	State Auditor	Administration
Employees Quarterly Report	Texas Workforce Commission	Administration
Employer's Quarterly Federal Tax Return	Internal Revenue Service	Administration
Annual Financial Report	Governor's Office; Legislative Budget Board; State Comptroller; State Auditor	Administration
Non-Financial Annual Report	Governor's Office; Legislative Budget Board; State Auditor	Administration
Operating Budget	Governor's Office; Legislative Budget Board; State Comptroller; State Auditor	Administration
ABEST Reconciliation	Legislative Budget Board	Administration
Historically Underutilized Business Progress Reports	Governor's Office; Lt. Governor; Speaker of House; Texas Building & Procurement Commission	Administration
Encumbrance Reports	State Comptroller; State Auditor; Legislative Budget Board	Administration
State Use Report	Texas Comptroller of Public Accounts	Administration
EEO Information Report	Texas Workforce Commission	Administration
Minority Hiring Practices	Texas Workforce Commission	Administration
SORM 200	Office of Risk Management	Administration
Performance and Funds Mgmt. Reports	Legislative Budget Board	All
Contract Workforce Report	State Auditor; Legislative Budget Board; Governor	Administration
Fleet Management Report	Texas Comptroller of Public Accounts	Administration
Risk Assessment	Governor's Office; Legislative Budget Board; State Comptroller; State Auditor, Sunset Advisory Commission	Administration
Veterans Workforce Summary Report	Comptroller	Administration
Space Utilization Survey	Texas Facilities Commission	Administration
SORM Report	SORM	Administration
Professional and Consultant Services Report	Legislative Budget Board	Administration
TexFlex Reconciliation Report	Employees Retirement System	Administration
Annual Debt Report	Office of Attorney General	Administration
Procurement Plan	Comptroller	Administration
Audit Corrective Action Plan	State Auditor	Enforcement and Administration

## ADM-02 continued

Report Title	Recipient(s)	Division Reporting
Sunset Compliance Status	State Auditor; Internal Auditor	All
Customer Services Report	Governor's Office	Administration
HPC Annual Report	HPC	All

## LIC-01

### Performance Measures

LICENSING RELATED PERFORMANCE MEASURES	FY2019 Projected Performance	FY2019 Performance Attained	Key or Non-Key (K/NK)	Projected Target Met?*
Number of New Licenses issued to Individuals (Pharmacists)	1,800	2,232	K	Exceeded
Number of Licenses Renewed (Individuals – Pharmacists)	18,000	19,159	K	Exceeded
Number of New Registrations Issued to Individuals (Technician and Trainee)	17,500	16,162	NK	Not Met
Number of Registrations Renewed (Technicians)	17,200	16,013	NK	Not Met
Percent of Licensees (Pharmacists and Pharmacies) with No Recent Violations (Disciplinary Orders)	95%	96.80%	K	Exceeded
Total Number of Pharmacists Licensed	37,469	37,358	NK	Met
Total Number of Facilities Licensed	8,200	8,210	K	Exceeded
Total Number of Individuals (Technicians & Trainees) Registered	66,100	64,793	NK	Exceeded
Percent of Licenses Who Renew Online	96%	95.44%	K	Met
Percent of New Individual Licenses Issued Online	96%	99.24%	NK	Exceeded

## LIC-02

### Licenses Issued

JURISPRUDENCE (MPJE)	TOTALS
Candidates Passing	1,897
Candidates Failing	243
TOTAL ADMINISTERED	2,140

NAPLEX	TOTALS
Candidates Passing	976
Candidates Failing	138
TOTAL ADMINISTERED	1,114

**LIC-02 continued**

<b>NEW PHARMACISTS LICENSED</b>	
Graduates of Texas Colleges of Pharmacy	831
Graduates of Out-of-State Colleges of Pharmacy	1,241
Credentialed by the Foreign Pharmacist Equivalency Committee	142
<b>TOTAL</b>	<b>2,214</b>

**LIC-03****Licensed Pharmacies**

<b>ACTIVE PHARMACIES</b>	
Class A (Community)	5,172
Class A-S (Community Pharmacy Engaged Compounding Sterile Preparations)	303
Class B (Nuclear)	31
Class C (Institutional)	828
Class C-S (Hospital Pharmacy Engaged In Compounding Sterile Preparations)	427
Class D (Clinic)	434
Class E (Non Resident)	529
Class E-S (Non-Resident Pharmacy Engaged In Compounding Sterile Preparations)	112
Class F (Free Standing Emergency Medical Centers)	335
Class G (Central Processing)	38
Class H	01
<b>TOTALS</b>	<b>8,210</b>
Remote Pharmacies	1,880

A total of 4,400 change documents were processed as follows:

<b>PHARMACY APPLICATIONS PROCESSED</b>	
Pharmacy Renewals	2,994
New Licenses Issued [new opens (455) and changes of ownership (146)]	603
Closings	387
Remote Pharmacies	347
Changes of Name	144
Changes of Location	242
Changes of Classification	30
<b>TOTAL</b>	<b>4,400</b>

## ENF-01

### Performance Measures

Enforcement-Related Performance Measure	FY2019 Projected Performance	FY2019 Performance Attained	Key or Non-Key (K/NK)	Projected Target Met?*
<b>Outputs:</b>				
Jurisdictional Complaints Resolved	5,360	5,694	K	Exceeded
Number of Licensed Individuals Participating in a Peer Assistance Program	160	146	K	Not Met
<b>Efficiency:</b>				
Average Time for Jurisdictional Complaint Resolution	195	149	K	Exceeded
<b>Outcomes:</b>				
Percent of Jurisdictional Complaints Resolved Resulting in Disciplinary Action	10.0%	7.6%	K	Not Met
Percent of Licensees (Pharmacists and Pharmacies) with No Recent Violations (Disciplinary Orders)	95.0%	96.8 %	K	Met
Recidivism Rate of Those Receiving Disciplinary Action	7.0%	6.2%	NK	Met
Percent of Jurisdictional Complaints Resolved within Six Months	65.0%	74.8%	NK	Met
Recidivism Rate for Participants in Peer Assistance Program	30.0%	29.0%	NK	Met
One-Year Completion Rate for Participants in Peer Assistance Program	80.0%	75.7%	NK	Not Met
<b>Explanatory:</b>				
Jurisdictional Complaints Received	5,620	5,618	K	Met

\* Within a 5% variance, TSBP's actual performance was either: equivalent to projected performance ("Met") or better than projected performance ("Exceeded").

## ENF-02

### Complaints Reviewed and Closed

Year	Complaints Received	% Change Complaints Received Previous Year	Complaints Closed	% Change Complaints Closed Previous Year	% Complaints Closed	*Resolution Time (Agency Average)	% Change Time
FY15	5,925	+7%	5,955	+6%	101%	170 Days	-3%
FY16	6,146	+4%	6,265	+5%	102%	166 Days	-2%
FY17	6,398	+4%	5,938	-5%	93%	152 Days	-8%
FY18	5,931	-7%	6,524	+10%	110%	183 Days	+20%
FY19	5,682	-4%	5,766	-12%	101%	145 Days	-20%

\* TSBP increased projected complaint resolution to 195 days for FY2018 projection. In FY14 – FY17, the projected Resolution Time (Agency Average) was set at 180 days.

**ENF-03****Dispensing Error Complaints**

Type of Dispensing Error	FY2015	FY2016	FY2017	FY2018	FY2019	5-Year Avg.
Wrong Drug/Strength or Wrong Directions for Use	189	194	168	198	171	184
Mislabeled	11	17	11	17	10	13
Dispensed Wrong Quantity	40	57	42	55	19	43
Dispensed Outdated Drug	11	4	6	2	2	5
Packaging/Delivery Error	18	24	13	25	17	19
Error + No Counseling	5	0	2	2	0	2
Total # Dispensing Error Complaints	274	296	242	299	219	266
Total # Complaints Closed	5,955	6,265	5,938	6,524	5,766	6,090
% Dispensing Error Complaints	5%	5%	4%	5%	4%	4%

**ENF-04****Data on Form of Complaints**

Form of Complaints	FY2017	FY2018	FY2019	% of FY2019	3-Yr. Avg.	% of 3-Yr. Avg.
Telephone	16	19	7	N/A	14	N/A
Letter	168	222	134	2%	175	3%
TSBP Complaint Form	109	124	129	2%	121	2%
HPC 800 #	8	17	6	N/A	10	N/A
Fax	44	49	36	1%	43	1%
Visit	0	0	0	N/A	N/A	N/A
Agency Report	1	3	25	N/A	10	N/A
Inspection	95	117	87	2%	100	2%
Interoffice Referral	42	31	160	3%	78	1%
Licensure Application	2,371	2,295	2,200	38%	2,289	38%
Data Bank	107	138	133	2%	126	2%
Theft/Loss Report	1,099	1,287	897	16%	1,094	18%
Investigation	506	574	420	7%	500	8%
Intra-Agency Referral	20	31	39	1%	30	N/A
Malpractice Report	4	3	6	N/A	4	N/A
Press Clip	1	3	3	N/A	2	N/A
Email *	152	202	211	4%	188	3%
Internet *	520	663	637	11%	607	10%
Background Checks **	675	743	632	11%	683	11%
Other	0	3	4	N/A	2	N/A
<b>TOTAL</b>	<b>5,938</b>	<b>6,524</b>	<b>5,766</b>	<b>100%</b>	<b>6,076</b>	<b>100 %</b>

\* TSBP accepts complaints via email, as well as through the agency's website (Internet). TSBP makes a distinction between email complaints (where the complainant sends an electronic message/ complaint to a TSBP employee) and Internet complaints (where the complainant completes the on-line TSBP complaint form). TSBP began accepting on-line complaints in the Spring of 2001.

\*\* Category includes daily and quarterly reports.

N/A – not applicable, value less than 0.01

## DATA ON SOURCE OF COMPLAINTS CLOSED

Source of Complaints	FY2017	FY2018	FY2019	% of FY2019	3-Yr. Avg.	% of 3-Yr. Avg.
Consumer	547	645	567	10%	586	10%
Government Agency	726	807	688	12%	740	12%
Pharmacist	65	64	72	1%	67	1%
Pharmacist (Self)	70	91	69	1%	77	1%
Pharmacist Applicant	235	184	171	3%	197	3%
Technician	14	19	5	N/A	13	N/A
Technician (Self)	67	67	17	N/A	50	1%
Tech Applicant	119	122	172	3%	138	2%
Technician Trainee	3	3	2	N/A	3	N/A
Tech Trainee (Self)	0	8	1	N/A	3	N/A
Tech Trainee Applicant	754	718	1,109	19%	860	14%
Intern	4	3	0	N/A	2	N/A
Intern Applicant	59	70	12	N/A	47	1%
TSBP	1,408	1,441	1,249	22%	1,366	22%
Doctor	45	79	92	2%	72	1%
Other Health Professional	43	28	40	1%	37	1%
NABP	115	139	131	2%	128	2%
PIC, Pharmacy Manager, or Supervisor	1,433	1,657	1,075	19%	1,388	23%
Pharmacy Self-Report*	0	15	11	N/A	9	N/A
Out of State Pharmacy Self-Report*	1	24	62	1%	29	N/A
Employee/Ex-Employee –RPH*	0	1	11	N/A	4	N/A
Employee/Ex-Employee TCH/TNT*	0	14	22	N/A	12	N/A
Loss Prevention Officer (Corporate)	1	1	0	N/A	1	N/A
Manufacturing Rep.	1	5	22	N/A	9	N/A
Professional Recovery Network (PRN)	13	23	14	N/A	17	N/A
Insurance Company	69	151	69	1%	96	2%
Attorney	5	8	6	N/A	6	N/A
Employee/Ex-Employee	17	34	8	1%	20	N/A
Media	0	2	0	N/A	1	N/A
Drug Screening Co.	123	99	66	1%	96	2%
Other	1	2	3	N/A	2	N/A
<b>TOTAL</b>	<b>5,938</b>	<b>6,524</b>	<b>5,766</b>	<b>100%</b>	<b>6,076</b>	<b>100 %</b>

\* new source in FY2017

N/A – not applicable, value less than 0.01

**ENF-06**
**Data on Subject of Complaints**

<b>Subjects of Complaints</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>	<b>3-Yr. Average</b>
<b>Licensees (RPh/Pharmacy)</b>	<b>2,683 (45%)</b>	<b>3,367 (52%)</b>	<b>2,771 (48%)</b>	<b>2,940 (48%)</b>
Pharmacist	576	685	578	613
In-State Pharmacy	1,872	2,306	1,991	2,056
Out-of-State Pharmacy	235	376	202	271
<b>Registrants (Intern/Tech)</b>	<b>1,047 (18%)</b>	<b>1,039 (16%)</b>	<b>770 (13%)</b>	<b>952 (16%)</b>
Intern	26	19	27	24
Technician	680	656	421	586
Technician Trainee	341	364	322	342
<b>Applicants (Lic &amp; Reg)</b>	<b>2,167 (36%)</b>	<b>2,075 (32%)</b>	<b>2,156 (37%)</b>	<b>2,132 (35%)</b>
Pharmacist	248	188	169	202
Pharmacy	138	128	109	125
Intern	59	88	59	69
Technician	245	227	228	233
Technician Trainee	1,477	1,444	1,591	1,504
<b>Non-Licensees</b>	<b>41 (1%)</b>	<b>43 (1%)</b>	<b>69 (1%)</b>	<b>51 (1%)</b>
Doctor	12	7	0	6
Manufacturer	0	2	1	N/A
Wholesaler	0	0	0	N/A
Non-Licensed Facility or Person	23	28	62	38
Insurance Company/ PBM	5	3	6	5
Out-of-State Facility	1	3	0	1
Other	0	0	0	N/A
<b>TOTAL</b>	<b>5,938</b>	<b>6,524</b>	<b>5,766</b>	<b>6,076</b>



## Data on Alleged Violations of Complaints

<b>Alleged Violation</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY019</b>	<b>3-Yr. Avg.</b>	<b>% of 3-Yr. Avg.</b>
<b>Diversion</b>	<b>5</b>	<b>2</b>	<b>4</b>	<b>4</b>	<b>N/A</b>
Controlled Substances (C/S)	2	1	3	2	N/A
Dangerous Drugs (D/D)	1	0	0	N/A	N/A
Both (C/S & D/D)	0	1	1	1	N/A
Internet Rxs	2	0	0	1	N/A
<b>Unauthorized Dispensing</b>	<b>5</b>	<b>22</b>	<b>27</b>	<b>18</b>	<b>N/A</b>
Controlled Substances	0	7	2	3	N/A
Dangerous Drugs	3	14	21	13	N/A
Both (C/S & D/D)	2	1	4	2	N/A
<b>Illegal Delivery</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>N/A</b>	<b>N/A</b>
Controlled Substances	0	0	0	N/A	N/A
Dangerous Drugs	0	0	1	N/A	N/A
Both (C/S & D/D)	0	0	0	N/A	N/A
<b>Illegal Possession</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>N/A</b>
Controlled Substances	1	2	0	1	N/A
Dangerous Drugs	0	1	0	N/A	N/A
Both (C/S & D/D)	0	0	0	N/A	N/A
<b>Convictions/Criminal Offenses</b>	<b>1,479</b>	<b>1,490</b>	<b>965</b>	<b>1,311</b>	<b>22%</b>
Felony	34	35	22	30	N/A
Misdemeanor	94	93	114	100	2%
DWI/PI	378	426	435	413	7%
Deferred Adjudication	197	202	186	195	3%
Offense on Application	776	734	208	573	9%
<b>Dispensing Error</b>	<b>244</b>	<b>299</b>	<b>194</b>	<b>246</b>	<b>4%</b>
Wrong Drug/Strength	168	198	146	171	3%
Mislabeled	11	17	10	13	N/A
Wrong Quantity	43	55	19	39	1%
Outdated Drug	7	2	2	4	N/A
Packaging/Delivery	13	25	17	18	N/A
Dispensing Error and No or Improper Patient Counseling	2	2	0	1	N/A
No or Improper Patient Counseling	55	84	29	56	1%
No or Improper Drug Regimen Review	12	24	25	20	N/A
Theft/Loss of C/S and/or D/D	1,074	1,257	890	1,074	18%
Non-Therapeutic Dispensing	24	38	109	57	1%
Action by Other Board	359	443	346	383	6%
Non-Compliance with Substitution Rules	16	6	4	9	N/A
Non-Compliance with Disciplinary Order	331	301	275	302	5%
Non-Compliance with PRN Contract	11	19	13	14	N/A
Interference with Doctor/Patient Relationship	91	92	155	113	2%
Confidentiality	16	28	28	24	N/A
Failed to Keep Records	3	0	2	2	N/A
Negligence	0	0	2	N/A	N/A
Unsafe Practice	0	1	5	2	N/A
Compounding	28	20	19	22	N/A
Unprofessional Conduct	2	9	12	8	N/A
Gross Immorality	0	0	1	N/A	N/A
<b>Fraud</b>	<b>1,017</b>	<b>832</b>	<b>487</b>	<b>779</b>	<b>13%</b>
Fraud, Deceit & Misrepresentation	6	11	5	7	N/A
Falsified Response to Warning Notice	0	0	2	N/A	N/A

## ENF-07 continued

Alleged Violation	FY2017	FY2018	FY2019	3-Yr. Avg.	% of 3-Yr. Avg.
Falsified Application	985	750	417	717	12%
Filled/Passed Forged Prescription	17	54	43	38	1%
Insurance Fraud	5	14	16	12	N/A
Medicare Fraud	4	3	4	4	N/A
<b>Impairment</b>	<b>18</b>	<b>16</b>	<b>13</b>	<b>16</b>	<b>N/A</b>
Probable Cause	11	10	11	11	N/A
Drug & Alcohol	2	2	0	1	N/A
Drug	2	1	2	2	N/A
Alcohol	3	1	0	1	N/A
Physical	0	0	0	N/A	N/A
Mental	0	2	0	1	N/A
Changed Prescription	9	22	19	17	N/A
Aiding and Abetting	9	20	8	12	N/A
Technician working with No/Del Registration	42	59	22	41	1%
Non-Therapeutic Prescribing (Doctor)	7	4	3	5	N/A
Excessive Purchases of Controlled Substances	0	5	20	8	N/A
Anabolic Steroids	0	0	0	N/A	N/A
Grey Market Diversion	0	1	0	N/A	N/A
Samples	2	2	0	1	N/A
Technician Violation	4	8	1	4	N/A
Improper Security	1	3	0	1	N/A
Problem with OTC Drug	4	1	0	1	N/A
Closed Pharmacy Improperly	1	6	4	4	N/A
Operating Pharmacy without License	3	2	4	3	N/A
Working Conditions	3	7	13	8	N/A
Delinquent License	0	2	3	2	N/A
Kickbacks	1	1	7	3	N/A
No PIC	9	40	74	41	1%
Recordkeeping Error	87	144	87	106	2%
Notification Violation	1	1	5	2	N/A
No Annual/PIC/DEA Inventory	1	1	0	1	N/A
C-II Rx	3	1	1	2	N/A
Improper Rx's Issued by Doctors	0	2	0	1	N/A
Advertising	1	0	2	1	N/A
Overcharging	0	2	0	1	N/A
Billing Dispute	34	22	34	30	N/A
Customer Service	23	28	81	44	1%
Hot Check	0	0	1	N/A	N/A
Accountability Audit Discrepancies (shortages/overages)	4	12	6	7	N/A
CE Audit	39	2	5	15	N/A
Default on Student Loans	0	0	0	N/A	N/A
Shipping to Other States without a License	17	9	13	13	N/A
<b>Other Allegations</b>	<b>772</b>	<b>1,055</b>	<b>1,702</b>	<b>1,176</b>	<b>19%</b>
Texas Pharmacy Act	11	13	18	14	N/A
Texas Dangerous Drug Act	1	2	0	1	N/A
Texas Controlled Substances Act	13	17	16	15	N/A
Food Drug & Cosmetic Act	14	19	8	14	N/A
TSBP Rule	205	262	194	220	4%

## ENF-07 continued

Alleged Violation	FY2017	FY2018	FY2019	3-Yr. Avg.	% of 3-Yr. Avg.
Other Laws/Rules	528	742	1,466	912	15%
Request Disciplinary Action	33	30	11	25	N/A
Reinstatement	7	12	9	9	N/A
Modification	30	34	25	30	N/A
<b>TOTAL</b>	<b>5,938</b>	<b>6,524</b>	<b>5,766</b>	<b>6,076</b>	<b>100%</b>

N/A – not applicable, value less than 0.01

## ENF-08

### Data on Resolution of Complaints

	FY2017	FY2018	FY2019	3-Yr. Avg.	% of 3- Yr. Avg.
<b>Investigations Not Resulting in Disciplinary Action:</b>	<b>4,995</b>	<b>5,284</b>	<b>4,108</b>	<b>4,796</b>	<b>79%</b>
Investigate + Dismissal (Warning) Letter	1,166	1,156	767	1,030	17%
Investigate + Complaint Closed with Verbal Warning	112	148	267	176	3%
Investigate + Complaint Closed with No Action Due to Insufficient Evidence to Prove Violation Occurred	2,410	2,408	2,077	2,298	38%
Investigate + Lost Jurisdiction (registration expired)	155	165	152	157	3%
Inspections	21	114	15	50	<1%
Inspection + Warning Notice or Dismissal Letter	29	37	6	24	N/A
Application Withdrawn	154	180	97	144	2%
Pharmacy Closed	71	119	110	100	2%
Other *	877	957	617	817	13%
<b>Investigations Resulting in Disciplinary Action:</b>	<b>715</b>	<b>715</b>	<b>658</b>	<b>696</b>	<b>11%</b>
Agreed Board Order	485	494	388	456	8%
Board Order	75	68	56	66	1%
Preliminary Notice Letter + Dismissal (Warning) Ltr.	1	0	0	<1	N/A
PNL + Application Withdrawn (with or without Informal Conference)	114	86	158	119	2%
PNL + Informal Conference + Dismissal Letter	6	17	20	14	N/A
PNL + Informal Conference + Case Dismissed	11	16	6	11	N/A
PNL + Case Dismissed or Other	12	3	2	6	N/A
PNL + Remedial Plan	11	31	28	23	N/A
Temporary Suspension Hearing + Case Dismissed	0	0	0	N/A	N/A
<b>Referrals To:</b>	<b>41</b>	<b>51</b>	<b>22</b>	<b>38</b>	<b>1%</b>
Medical Board	8	5	0	4	N/A
PRN Program	0	4	2	2	N/A
Supervisor	3	13	15	10	N/A
Other Agency	30	29	5	21	N/A
<b>No Action Because:</b>	<b>187</b>	<b>474</b>	<b>978</b>	<b>546</b>	<b>9%</b>
No Violation	4	30	311	115	2%
No Jurisdiction	17	27	59	34	N/A
Insufficient Information	4	9	4	6	N/A
Other **	162	408	604	391	6%
<b>TOTAL</b>	<b>5,938</b>	<b>6,524</b>	<b>5,766</b>	<b>6,076</b>	<b>100%</b>

\* Represents miscellaneous actions, such as: complainant has withdrawn complaint, multiple actions [e.g., investigation and refer to PRN, complainant will not cooperate with investigation, alleged violation has already been addressed by a previous (recent) compliance inspection or the resolution is not described by the above categories].

\*\* Violation not substantive (e.g., report of theft/loss of small quantity of controlled substance).

N/A = Not Applicable, value is below 0.01

## Employee Pilferage Reports

EMPLOYEE THEFT BY DRUG CATEGORY	No. of Reported Instances of Theft	DUs	Tech or Tech Trainee	RPH	LVN	RN or CRNA	~Other/ Unknown Employee
<b>TABLETS</b>							
Amphetamine	10	2,093	6	2	0	2	0
Analgesic	14	5,766	5	3	0	5	1
Barbiturate	2	201	1	1	0	0	0
Benzodiazepine	37	25,491	20	6	1	6	4
Codeine	14	10,873	6	1	2*	6	0
Carisoprodol	7	2,901	6	1	0	0	0
Opiate	70	89,922	20	12	2*	28	9
Stimulant	1	30	1	0	0	0	0
Dangerous Drugs	4	173	3	1	0	0	0
OTC Products	1	30	0	1	0	0	0
<b>SUBTOTAL</b>	<b>160</b>	<b>137,480</b>	<b>68</b>	<b>28</b>	<b>5</b>	<b>47</b>	<b>14</b>
<b>LIQUIDS</b>							
Androgen	1	50 ml	1	0	0	0	0
Anesthetic	3	69 ml	0	0	0	0	3
Benzodiazepine	14	295 ml	1	0	0	11	2
Codeine	2	4,018 ml	1	0	0	0	1
Opiate	88	5,235.5 ml	1	1	2*	80	5
Dangerous Drugs	1	403 ml	0	0	0	1	0
<b>SUBTOTAL</b>	<b>109</b>	<b>10,070.5</b>	<b>4</b>	<b>1</b>	<b>2</b>	<b>92</b>	<b>11</b>
<b>PATCHES</b>							
Opiate (patches)	2	44	1	0	1	0	0
<b>SUBTOTAL</b>	<b>2</b>	<b>44</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>TOTAL</b>	<b>271</b>	<b>147,594.5</b>	<b>73</b>	<b>29</b>	<b>8</b>	<b>139</b>	<b>25</b>

~Other covers theft or loss reported due to Non-pharmacy employees, non-licensed person, lab technicians; or unknown. No physicians or student pharmacist-interns were identified during this reported period.

+ Tramadol or tramadol/APAP identified as Androgen.

\*Two LVNs identified on same report of theft/loss.

TSBP received 6 reports indicating that pharmacies experienced theft of 203 tablets and 403 ml of dangerous drugs and nonprescription drug products by 6 individuals due to employee pilferage.

## Employee Pilferage of Opiates

OPIATE TYPE	No. of Reported Instances	DUs	Tech or Tech Trainee	RPH	LVN	RN or CRNA	Other/ Unknown Employee
<b>TABLETS</b>							
Hydrocodone/APAP	41	71,381	8	7	2*	19	6
Hydrocodone/Ibuprofen	1	284	1	0	0	0	0
Hydromorphone	1	113	1	0	0	0	0
Methadone	1	244	1	0	0	0	0
Meperidine	1	2	0	0	0	1	0
Morphine	2	945	1	0	0	0	1
Oxycodone	15	15,177	4	3	0	6	2
Oxycodone/APAP	8	1,776	4	2	0	2	0
<b>Total</b>	<b>70</b>	<b>89,922</b>	<b>20</b>	<b>12</b>	<b>2</b>	<b>28</b>	<b>9</b>
<b>LIQUID</b>							
Fentanyl	27	3,712	0	0	0	25	2
Hydrocodone/ Chlorpheniramine	2	453	1	1	0	0	0
Hydromorphone	27	827	0	0	2*	26	0
Morphine	28	180.5	0	0	0	25	3
Meperidine	4	63	0	0	0	4	0
<b>Total</b>	<b>88</b>	<b>5235.5</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>80</b>	<b>5</b>
<b>PATCHES</b>							
Fentanyl	2	44	1	0	1	0	0
<b>Total</b>	<b>2</b>	<b>44</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>
<b>TOTALS</b>	<b>160</b>	<b>95201.5</b>	<b>22</b>	<b>13</b>	<b>5</b>	<b>108</b>	<b>14</b>

## ENF-11

### Employee Pilferage by Employee Type

CLASSIFICATION OF EMPLOYEE	FY2017		FY2018		FY2019		% Change FY2018-FY2019
	Total # of Dosage Units	%	Total # of Dosage Units	%	Total # of Dosage Units	%	
Registered Pharmacist	24,431	18%	42,361	28%	67,697	46%	+37%
Pharmacist Intern	0	N/A	0	N/A	0	N/A	N/A
Registered Pharmacy Technician	55,089	41%	73,128	48%	63,792	43%	-13%
Pharmacy Technician-in-Training	27,103	20%	27,094	18%	8,479	5%	-100>%
Physician	0	N/A	1	N/A	0	N/A	N/A
Registered Nurse	2,814	2%	9,755	6%	4,597.5	3%	-53%
Certified Registered Nurse Anesthetist	56	N/A	7	N/A	1,392	1%	N/A
Licensed Vocational Nurse	15	N/A	6	N/A	58	N/A	+100>%
Miscellaneous *	18,784	14%	670	N/A	1,579	1%	+58%
<b>TOTALS</b>	<b>132,872</b>	<b>100%</b>	<b>153,420</b>	<b>100%</b>	<b>147,594.5</b>	<b>100%</b>	<b>-4%</b>

\*\* Total Dosage Units based on combined tablets, liquids in mls, and patches.

\* Non-licensed employee, laboratory technician or unknown.

N/A = Not Applicable, value is below 0.01.

## ENF-12

### Criminal History Reports

Criminal History Notification Type	FY2015	FY2016	FY2017	FY2018	FY2019
Daily Reports (fingerprints)	592	605	590	598	644
Quarterly Reports	211	143	148	126	104
Total	803	748	738	724	748

## ENF-13

### Total Number of Orders Entered by TSBP That Required Monitoring on Licensees (Pharmacists and Pharmacies), Interns, and Technicians

	FY2019	% of FY2019
Total Number of Orders on Licensees Requiring Monitoring	226	56%
Total Number of Orders on Technicians Requiring Monitoring	130	32%
Total Number of Orders Requiring Monitoring	356	89%
Total Number of Orders Not Requiring Monitoring	46	11%
<b>Total Number of Orders Entered by TSBP in FY2019</b>	<b>402</b>	<b>100%</b>

## ENF-14

### Types of TSBP Disciplinary Orders Entered on Licensees (Pharmacists and Pharmacies) and Interns That Required Monitoring

Sanction	FY2017 Orders	FY2018 Orders	FY2019 Orders	% of FY2019	3-Yr. Avg.	% of 3-Yr. Avg.
Revoke / Retire	24	21	18	7%	21	7%
Suspension	27	32	30	12%	30	10%
Restricted	4	6	8	3%	6	2%
Rehabilitation Orders*	12	9	7	3%	9	3%
Reinstatement	5	8	5	2%	6	2%
Fines or Probation Fees Only	122	137	77	30%	112	36%
Continuing Education, Texas Jurisprudence Exam, and/or Pharmacy Law Course (could also include fines and/or probation fees)	19	31	20	8%	23	7%
Continuous Quality Improvement Program, Self-Assessments, Policies/ Procedures, and/or Quarterly Reports (could also include fines and/or probation fees)	63	85	61	24%	70	22%
Public Orders Requiring Drug Screens	0	0	0	N/A	N/A	N/A
<b>Total number of orders on licensees requiring monitoring</b>	<b>276</b>	<b>329</b>	<b>226</b>	<b>89%</b>	<b>277</b>	<b>89%</b>
<b>Total number of orders not requiring monitoring</b>	<b>48</b>	<b>30</b>	<b>28</b>	<b>11%</b>	<b>35</b>	<b>11%</b>
<b>Total orders</b>	<b>324</b>	<b>359</b>	<b>254</b>	<b>100%</b>	<b>312</b>	<b>100%</b>

\* Rehabilitation Orders which are not included in the following categories: Revocation, Restriction, Reinstatement, and Suspension.

N/A = Not Applicable, value is below 0.01.

## ENF-15

### Types of Disciplinary Orders Entered on Technicians That Required Monitoring

Sanction	FY2017 Orders	FY2018 Orders	FY2019 Orders	% of FY2019	3-Year Average	% of 3-Year Average
Revoke *	48	39	45	30%	44	26%
Suspension	33	22	23	16%	26	15%
Restriction	0	0	2	1%	1	1%
Fines Only	64	69	46	31%	60	36%
Other **	29	14	14	9%	19	11%
<b>Total number of orders on technicians requiring monitoring</b>	<b>174</b>	<b>144</b>	<b>130</b>	<b>88%</b>	<b>149</b>	<b>88%</b>
<b>Total number of orders on technicians not requiring monitoring</b>	<b>27</b>	<b>15</b>	<b>18</b>	<b>12%</b>	<b>20</b>	<b>12%</b>
<b>Total number of orders on technicians</b>	<b>201</b>	<b>159</b>	<b>148</b>	<b>100%</b>	<b>169</b>	<b>100%</b>

\* Disciplinary Orders that TSBP enters on Technicians and Technician Trainees contain language that will suspend a registration for non-compliance of conditions, and ultimately revoke a registration for continued non-compliance. During FY2018, TSBP revoked the registrations of 47 Technicians due to non-compliance.

\*\* Orders not in other categories (e.g., probation with conditions; probation with conditions and fines; report required from Mental Health Professional)

N/A = Not Applicable, value is below 0.01.

## ENF-16

### Pharmacy Technicians / Pharmacy Technician Trainees Monitored (with probation under conditions, including random drug screens) by Enforcement Division

<b>*Pharmacy Technicians / Pharmacy Technician Trainees Monitored (with probation under conditions, including random drug screens) by Enforcement Division (FY2018 – FY2019)</b>			
<b>Fiscal Year</b>	<b>Total Orders</b>	<b>Total New Orders</b>	<b>Total Being Monitored</b>
FY2018	24	20	40
FY2019	18	20	32

\* TSBP entered 18 Orders on pharmacy technicians or pharmacy technician trainees who were subject to probation periods with random drug screening in FY2019. Of the 18 Orders, there were 14 Orders resulting in a pharmacy technician or pharmacy technician in training being added to the number who were being monitored at the end of FY2019, as reflected in the chart below. However, 22 technicians/tech-trainees were deleted from the list as a result of early termination of probation, successful completion of probation, death, revocation or retirement of the registration, registration expired, or application denied subsequent to entry of the Order.

## ENF-17

### Confidential Disciplinary Orders Entered on Pharmacists and Interns

<b>Nature of Violation</b>	<b>FY2017</b>	<b>FY2018</b>	<b>FY2019</b>	<b>% of FY2019</b>	<b>3-Yr. Avg.</b>	<b>% of 3-Yr. Avg.</b>
Non-Compliance with ABO	6	9	3	9%	6	14%
Non-Compliance with PRN	5	3	2	6%	3	7%
Action by Other Boards	5	1	2	6%	3	7%
Audit Shortages	0	0	0	N/A	N/A	N/A
Alcohol-Related Conviction	1	0	0	N/A	N/A	N/A
Theft of Prescription Drugs	5	3	3	9%	4	10%
Created Fraudulent Rx or Obtained C/S by Fraud	0	1	0	N/A	N/A	N/A
Convictions	1	4	8	25%	4	10%
Deferred Adjudication	3	1	1	3%	2	5%
Illegal Possession of Controlled Substances	0	0	0	N/A	N/A	N/A
Unauthorized Refills of Controlled Substances	0	0	1	3%	N/A	N/A
Probable Cause/Dependency	5	2	0	N/A	2	5%
Mental Impairment	0	0	0	N/A	N/A	N/A
Request for Modification of Previously Entered ABO	12	12	7	22%	10	24%
Request for Retirement or Revocation	10	2	3	9%	5	12%
Request for Reinstatement	1	2	2	6%	2	5%
<b>TOTAL</b>	<b>54</b>	<b>40</b>	<b>32</b>	<b>100%</b>	<b>42</b>	<b>100%</b>

N/A = Not Applicable, value is below 0.01.



### Impaired/Recovering Pharmacists Monitored by Enforcement Division

Fiscal Year	Total Orders*	Total New Orders**	Total Being Monitored***
FY2015	54	19	108
FY2016	36	18	106
FY2017	55	23	99
FY2018	40	13	86
FY2019	32	15	79

\* All confidential Orders entered by the Board involving an impaired pharmacist or intern (including revocations, modifications, and "second Orders" due to disciplinary action for violation of the terms of previously entered Orders). Of the 32 confidential pharmacist/intern Orders entered in FY2019, there were 15 Orders resulting in an impaired/recovering pharmacist or intern being added to the number who were being monitored at the end of FY2019 is set forth in Appendix Chart E-03-17. However, 22 pharmacists were deleted from the list as a result of early termination of probation, successful completion of probation, death, revocation or retirement of license, license expired, or application withdrawn subsequent to entry of order. Accordingly, as of August 31, 2019, a total of 79 impaired/recovering pharmacists or interns were being monitored by TSBP. The number of individuals being monitored at year-end, as compared to the year-end of previous fiscal years.

\*\* An Order that resulted in one individual being added to the list of impaired pharmacists to be monitored.

\*\*\* Total number of pharmacists being monitored as of the last day of the reporting period. The number represents the new Orders entered by the agency during the fiscal year, minus the number of deletions made during reporting period (e.g., as a result of death, early termination of probation through the entry of an Order, and/or successful completion of probation).

**SANCTIONS IMPOSED BY THE ENTRY OF DISCIPLINARY ORDERS ON PHARMACISTS,  
PHARMACIES, INTERNS, AND APPLICANTS FOR LICENSURE AND INTERN REGISTRATIONS  
(FY2019)**

			Pharmacist	Pharmacy	Total
<b>Licenses Removed</b>	<b>18</b>	<b>(7%)</b>			
Revoke			8	7	15
Retire			3	0	3
<b>Suspensions</b>	<b>58</b>	<b>(23%)</b>			
Suspension			8	3	11
Suspension w/Conditions			19	1	20
Suspension w/ Fine			0	0	0
Suspension/Fine/Conditions			0	0	0
Probation			2	3	5
Probation w/Conditions			5	3	8
Probation/Fine			1	2	3
Probation/Fine/Conditions			4	7	11
<b>Restricted</b>	<b>8</b>	<b>(3%)</b>	8	0	8
<b>Other</b>	<b>138</b>	<b>(54%)</b>			
Fine			32	26	58
Fine with Conditions			2	17	19
Fine and Reprimand			1	3	4
Fine, Reprimand with Conditions			6	16	22
Reprimand with Conditions			6	18	24
Reprimand			7	4	11
Require MHP Evaluation			0	0	0
<b>Issuance License/Regist.</b>	<b>13</b>	<b>(5%)</b>			
Grant with Suspension			0	0	0
Grant with Restrictions			0	0	0
Grant with Probation			1	1	2
Grant with Probation and Fine			1	0	1
Grant with Probation/Fine/Conditions			0	0	0
Grant with Probation and Conditions			3	0	3
Grant with Reprimand and Fine			0	0	0
Grant with Fine			1	2	3
Grant with Fine/Conditions			0	0	0
Grant with Reprimand			4	0	4
<b>Reinstatements</b>	<b>5</b>	<b>(2%)</b>			
Grant			0	0	0
Grant with Probation/Conditions			5	0	5
Deny			0	0	0
<b>Modifications</b>	<b>14</b>	<b>(6%)</b>			
Grant			12	2	14
Deny			0	0	0
<b>TOTAL FY2019:</b>	<b>254</b>	<b>(100%)</b>	<b>139</b>	<b>115</b>	<b>254</b>

FY2019 Orders Entered Against Pharmacist Licenses	139	55%
FY2019 Orders Entered Against Pharmacy Licenses	115	45%
FY2019 Total Disciplinary Orders on Pharmacist/Pharmacy	254	100%

**DISCIPLINARY ORDERS ON PHARMACISTS, INTERNS, AND**  
**APPLICANTS FOR LICENSURE AND INTERN REGISTRATIONS (FY2019)**  
**NATURE OF VIOLATIONS\***

	RPh	Phcy	Total	Total %
<b>Diversions</b>	<b>13</b>	<b>5</b>	<b>18</b>	<b>7%</b>
Illegal Delivery	0	0	0	
Illegal Possession of Rx Drugs	0	0	0	
Unauthorized Dispensing	5	1	6	
Theft	3	0	3	
Obtained C/S by Fraud	0	0	0	
No Valid Dr-Pt Relationship	5	4	9	
<b>Convictions/Defer Adj</b>	<b>20</b>	<b>0</b>	<b>20</b>	<b>8%</b>
Felony	4	0	4	
Misdemeanor	7	0	7	
Deferred Adjudication, Felony	5	0	5	
Deferred Adjudication, Misdemeanor	4	0	4	
Alcohol-Related	0	0	0	
<b>Audit Discrepancies</b>	<b>2</b>	<b>5</b>	<b>7</b>	<b>3%</b>
Drug	1	5	6	
Continuing Education	1	0	1	
<b>Practice Deficiencies</b>	<b>29</b>	<b>48</b>	<b>77</b>	<b>30%</b>
Dispensing Errors	12	27	39	
Dispensing Errors & No Counsel and/or No Drug Regimen Review	7	14	21	
No Counsel and/or DRR	9	6	15	
Compounding Sterile without Class S	0	0	0	
Shipping Rx to Other States w/o License	1	1	2	
<b>Unprofessional Conduct</b>	<b>41</b>	<b>48</b>	<b>89</b>	<b>35%</b>
Aiding and Abetting	2	1	3	
Allow Tech to Work without an Active Registration	6	4	10	
Falsified Application for Licensure	4	10	14	
Sterile Compounding w/o Proper Training	0	0	0	0
Impairment	0	0	0	
Action by TSBP or Other Boards	8	10	18	
Non-Compliance with Previously Entered Order	5	0	5	
Non-Compliance with PRN Program	2	0	2	
Violation of Board Rules	14	23	37	
<b>Other</b>				
Modification	12	2	14	6%
Reinstatement	4	0	4	2%
Request for Revocation/Retirement/Restrict		13	4	17 7%
Temporary Suspension Orders	5	3	8	3%
Other	0	0	0	N/A
<b>TOTAL FY19:</b>	<b>139</b>	<b>115</b>	<b>254</b>	<b>100%</b>

\* Board Orders/Agreed Board Orders may contain more than one type of violation. However, for purposes of this list, only one type of violation has been identified. The identified violation was selected as the primary violation.

**SANCTIONS IMPOSED BY THE ENTRY OF DISCIPLINARY ORDERS ON  
PHARMACY TECHNICIANS, TECHNICIAN TRAINEES, AND  
APPLICANTS FOR TECHNICIAN/TRAINEE REGISTRATIONS (FY2019)**

Percent		Total	
<b>Registration Removed</b>		<b>45</b>	<b>(30%)</b>
Revoke	45		
Retire	0		
<b>Suspensions</b>		<b>28</b>	<b>(19%)</b>
Suspension	0		
Suspension, followed by Probation	4		
Suspension w/Conditions		11	
Suspension w/Conditions, followed by Probation	6		
Suspension/Fine	0		
Suspension/Fine w/Conditions, followed by Probation	0		
Probation	1		
Probation with Conditions		6	
Probation/Fine	0		
Probation/Fine with Conditions	0		
<b>Restricted</b>	<b>2</b>	<b>2</b>	<b>(N/A)</b>
<b>Other</b>		<b>21</b>	<b>(14%)</b>
Fine	15		
Fine with Conditions	4		
Fine/Reprimand	0		
Fine/Reprimand with Conditions	0		
Reprimand	2		
Reprimand with Conditions	0		
<b>Issuance Registration</b>		<b>52</b>	<b>(35%)</b>
Grant with Suspension	2		
Grant with Suspension/Fine	0		
Grant with Probation	15		
Grant with Probation/Conditions	4		
Grant with Probation/Conditions and Fine	0		
Grant with Probation and Fine	1		
Grant with Fine	10		
Grant with Fine and Reprimand	4		
Grant with Reprimand	16		
Deny	0		
<b>Reinstatements</b>		<b>0</b>	<b>(N/A)</b>
Grant with Suspension, followed by Prob/Cond	0		
Grant with Probation/Conditions	0		
Grant with w/Conditions and Reprimand	0		
Grant with Fine	0		
<b>Modifications</b>	<b>0</b>	<b>0</b>	<b>(N/A)</b>
<b>TOTAL FY2019:</b>		<b>148</b>	<b>(100%)</b>

**DISCIPLINARY ORDERS ON PHARMACY TECHNICIANS, TECHNICIAN TRAINEES, AND  
APPLICANTS FOR TECHNICIAN/TRAINEE REGISTRATIONS (FY2019)**  
**NATURE OF VIOLATIONS\***

		Total	Percent
<b>Diversion</b>		<b>5</b>	<b>(3%)</b>
Theft	4		
Forged Rx	1		
Illegal Delivery	0		
<b>Convictions/Deferred Adjudications</b>		<b>82</b>	<b>(55%)</b>
Felony	11		
with Falsified Application	0		
Misdemeanor	9		
with Falsified Application	3		
Deferred Adjudication/Felony	26		
with Falsified Application	2		
Deferred Adjudication/Misdemeanor	29		
with Falsified Application	2		
Alcohol-Related (e.g., DWI)	0		
with Falsified Application	0		
<b>Impairment</b>		<b>2</b>	<b>(1%)</b>
Drug or Alcohol Dependency	2		
with Falsified Application	0		
Probable Cause	0		
<b>Falsified Applications **</b>		<b>11</b>	<b>(7%)</b>
<b>Other Violations</b>		<b>20</b>	<b>(14%)</b>
Gross Immorality	0		
Non-Compliance w/Previously Entered Order	8		
Performed Tech Duties w/Delinquent Registration	4		
Performed Pharmacist Duties	2		
Performed Tech Duties without Registration	1		
Action by TSBP or Other Board	1		
Negligence	0		
CE Shortage	4		
<b>Request for Revocation/Retirement/Restriction</b>		<b>28</b>	<b>(19%)</b>
<b>Reinstatement</b>		<b>0</b>	<b>(N/A)</b>
<b>Modify</b>		<b>0</b>	<b>(N/A)</b>
<b>Temporary Suspension Orders</b>		<b>0</b>	<b>(N/A)</b>
<b>TOTAL FY19:</b>		<b>148</b>	<b>(100%)</b>

\* Board Orders/Agreed Board Orders may contain more than one type of violation. However, for purposes of this list, only one type of violation has been identified. The identified violation was selected as the primary violation.

\*\* Does not include the 7 falsified applications described above.

Type of Order	Summary Suspensions	SOAH Board Orders	Default Board Orders	ABOs Entered by ED	ABOs Public	Confidential Orders*	Total Number of Orders
Pharmacists, Pharmacies, and Interns	8	0	4	39	171	32	254
Pharmacy Technicians	0	0	36	65	47	0	148
<b>Total</b>	<b>8</b>	<b>0</b>	<b>40</b>	<b>104</b>	<b>218</b>	<b>32</b>	<b>402</b>

\* Contains all Confidential Orders (Default, ED Entered, and ABOs)

Remedial Plans	Pharmacists	Pharmacies	Total
<b>FY2015</b>	28	1	29
<b>FY2016</b>	19	0	19
<b>FY2017</b>	10	1	11
<b>FY2018</b>	15	2	17
<b>FY2019</b>	26	2	28
<b>TOTAL</b>	98	6	104

## Informal Conferences for Pharmacies and Pharmacists

Dates of Informal Conferences	# of Days	# of Phy/RPh Licensees	# of Techs	# of Cases	Dismissed, Refer to PRN, or Denied
September 11, 12 & 13, 2018	3	21	1	18	2
September 27, 2018	0.5	3		3	
October 9, 10 & 11, 2018	3	23		19	2
October 25, 2018	0.5	2		2	
December 11 & 12, 2018	2	30		17	
January 8, 9 & 10, 2019	3	35		23	2
January 24, 2020	0.5	3		3	
March 5 & 6, 2019	1.5	11		8	2
April 9, 10 & 11, 2019	3	34		26	3
June 4, 2019	1	13		10	2
July 9, 10 & 11, 2019	3	28		18	4
July 25, 2020	0.5	3		3	
<b>TOTAL</b>	<b>21.5</b>	<b>206</b>	<b>1</b>	<b>150</b>	<b>17</b>

## Informal Conferences for Technicians/Technician Trainees

Dates of Informal Conferences	# of Days	# of Cases	Applicants	Registrants	No-shows	Defaults
September 27, 2018	1	13	8	5	7	1
October 25, 2018	1	15	7	8	6	4
December 13, 2018	1	12	6	6	4	6
January 24, 2019	1	21	11	10	7	7
February 21, 2019	1	15	9	6	8	5
March 28, 2019	1	15	12	3	9	2
April 25, 2019	1	21	14	7	8	3
May 23, 2019	1	14	12	2	9	1
June 27, 2019	1	21	14	7	11	2
July 25, 2019	1	21	13	8	11	3
<b>TOTAL</b>	<b>10</b>	<b>168</b>	<b>106</b>	<b>62</b>	<b>80</b>	<b>34</b>

Rules
<b>For presentation at November 6, 2018 Board meeting:</b>
§281.68 concerning removal of a remedial plan from Board records
§283.12 concerning waiver of inactive status fees for military service members, military veterans, military spouses
§291.31 concerning automated devices and system in Class A pharmacies
§291.33 concerning automated devices and system in Class A pharmacies
§291.35 concerning official prescription requirements in Class A pharmacies
§291.75 concerning outpatient records in Class C pharmacies
§291.121 concerning remote services through automated storage and delivery system
§291.131 concerning compounding essentially copies of commercially available products
§291.133 concerning compounding essentially copies of commercially available products
§291.153 concerning medication therapy management services
§315.12 concerning controlled substances prescription forms
<b>For presentation at February 5, 2019 Board meeting:</b>
§281.7 concerning grounds for discipline of pharmacist license relating to inspection warning notices
§283.4 concerning electronic licensing documentation
§295.1 concerning electronic licensing documentation
§295.5 concerning electronic licensing documentation
§297.4 concerning electronic licensing documentation
§283.6 concerning preceptor requirements for display of certificate
§291.17 concerning annual inventory of Class C or C-S pharmacy
§291.34 concerning theft or significant loss reports
§291.55 concerning theft or significant loss reports
§291.75 concerning theft or significant loss reports
§291.76 concerning theft or significant loss reports
§291.151 concerning theft or significant loss reports
§315.2 concerning official prescription forms
§315.15 concerning access requirements
<b>For presentation at May 7, 2019 Board meeting:</b>
§281.14 concerning vendor protest procedures
§281.15 concerning negotiated rulemaking
§281.16 concerning alternative dispute resolution
§281.19 concerning vehicles
§283.11 concerning examination retake requirements
§295.8 concerning continuing education requirements
§291.6 concerning pharmacy fees
§295.5 concerning pharmacist fees
§297.4 concerning pharmacy technician and technician trainee fees
<b>For presentation at August 6, 2019 Board meeting:</b>
§283.12 concerning military spouses licensed/registered in similar jurisdictions
§297.10 concerning military spouses licensed/registered in similar jurisdictions
§291.121 concerning telepharmacy system in federally qualified health center
§295.8 concerning pharmacist continuing education
§297.8 concerning pharmacy technician and technician trainee continuing education
§295.13 concerning physician delegation in federally qualified health center
§309.5 concerning communication with prescriber
§315.3 concerning opioid prescriptions for acute pain
§315.6 concerning zero reporting to Prescription Monitoring Program
§315.11 concerning delegate access to Prescription Monitoring Program data
§315.15 concerning Prescription Monitoring Program access requirements



RULE SUBMISSIONS TO THE *TEXAS REGISTER*

Rules	Type of Action	Published in TxReg as Proposed	Published in TxReg as Adopted/Withdrawn
§281.62	Amendment	10/05/2018	11/30/2018
§281.65	Amendment	10/05/2018	11/30/2018
§291.17	Amendment	10/05/2018	11/30/2018
§291.28	Amendment	10/05/2018	11/30/2018
§291.34	Amendment	10/05/2018	11/30/2018
§291.74	Amendment	10/05/2018	11/30/2018
§291.104	Amendment	10/05/2018	11/30/2018
§291.129	Amendment	10/05/2018	11/30/2018
§315.6	Amendment	10/05/2018	11/30/2018
§315.15	Amendment	10/05/2018	11/30/2018
§281.68	Amendment	01/04/2019	03/08/2019
§283.12	Amendment	01/04/2019	03/08/2019
§291.31	Amendment	01/04/2019	03/08/2019
§291.33	Amendment	01/04/2019	03/08/2019
§291.35	Amendment	01/04/2019	03/08/2019
§291.75	Amendment	01/04/2019	03/08/2019
§291.121	Amendment	01/04/2019	03/08/2019
§315.12	Amendment	01/04/2019	03/08/2019
§291.131	Withdrawn	01/04/2019	03/08/2019
§291.133	Withdrawn	01/04/2019	03/08/2019
§291.153	Withdrawn	01/04/2019	03/08/2019
§281.7	Amendment	04/05/2019	06/14/2019
§283.4	Amendment	04/05/2019	06/14/2019
§295.1	Amendment	04/05/2019	06/14/2019
§295.5	Amendment	04/05/2019	06/14/2019
§297.4	Amendment	04/05/2019	06/14/2019
§283.6	Amendment	04/05/2019	06/14/2019
§291.17	Amendment	04/05/2019	06/14/2019
§291.34	Amendment	04/05/2019	06/14/2019
§291.55	Amendment	04/05/2019	06/14/2019
§291.75	Amendment	04/05/2019	06/14/2019
§291.76	Amendment	04/05/2019	06/14/2019
§291.151	Amendment	04/05/2019	06/14/2019
§315.2	Amendment	04/05/2019	06/14/2019
§315.15	Amendment	04/05/2019	06/14/2019
§291.32	Amendment	04/05/2019	06/14/2019
§291.123	Amendment	04/05/2019	06/14/2019
§291.153	Amendment	04/05/2019	06/14/2019
§281.14	New	06/28/2019	-
§281.15	Repeal	06/28/2019	-
§281.15	New	06/28/2019	-
§281.16	New	06/28/2019	-
§281.19	Amendment	06/28/2019	-
§291.6	Amendment	06/28/2019	-
§295.8	Amendment	06/28/2019	-
§283.11	Amendment	06/28/2019	-

Rules	Type of Action	Published in TxReg as Proposed	Published in TxReg as Adopted/Withdrawn
Ch. 291A (§§291.1-291.3, 291.5-291.11, 291.14-291.19, 291.22-291.24, 291.27-291.29)	Review	06/28/2019	-
Ch. 291E (§§291.91-291.94)	Review	06/28/2019	-
Ch. 291F (§§291.101-291.106)	Review	06/28/2019	-
Ch. 295 (§§295.1-295.9, 295.11-295.16)	Review	06/28/2019	-

#### OPEN MEETING SUBMISSIONS TO THE *TEXAS REGISTER*

Type of Submission	Date Published
Interagency Prescription Monitoring Program Work Group Meeting – 10/23/2018	9/28/2018
Temporary Suspension Hearing – E Moss Pharmacy #27537 and Job Ratemo #45136 - 10/30/2018	10/18/2018
Health Professions Council Board – 11/05/2018	10/25/2018
Board Business Meeting – 11/06/2018	10/25/2018
Guidelines for Establishing Pharmacist Peer Review Committees - 1/15/19	12/20/2018
Interagency Prescription Monitoring Program Work Group Meeting – 1/29/2019	01/16/2019
Board Business Meeting – 2/05/2019	01/24/2019
Interagency Prescription Monitoring Program Work Group Meeting – 4/30/2019	04/3/2019
Board Business Meeting – 5/7/2019	04/25/2019
Interagency Prescription Monitoring Program Work Group Meeting – 7/30/2019	7/10/2019
Business Board Meeting – 8/6/2019	7/24/2019
Temporary Suspension Hearing-8/7/2019 – RRX Pharmacy #29409, Ibrahim Zaidan #60546, and Gary Lynne Smith #20919	7/24/2019
Temporary Suspension Hearing – Care RRX Pharmacy #31475, Ibrahim Zaidan #60546, Gary Lynne Smith #20919, Tracy Thuy Ly #62372 - 8/28/2019	8/20/2019

**LEG-05****OPEN RECORDS REQUESTS FY2015 - 2019**

Fiscal Year	Verbal Requests	Written Requests		Total # of individual requests	Monthly Average		% Change from Prior FY		
		# of initiating requests	# of individual requests		# of individual verbal requests	# of individual written requests	# of initiating verbal requests	# of initiating written requests	Total # of initiating requests
FY15	514	1,998	-	-	-	-	124%	34%	46%
FY16	364	2,265	-	-	-	-	-29%	13%	5%
FY17	182	2,165	-	-	-	-	-50%	-4%	-10%
FY18	100	2,218	2,719	2,818	8	227	-45%	3%	-1%
FY19	106	2,667	4,510	4,616	9	375	6%	20%	20%

**LEG-06****ONLINE PRESENTATIONS**

DATE	PROGRAM	ATTENDANCE (APPROX.)
9/12/2018	Laws and Rules Update Webinar	97
10/10/2018	Laws and Rules Update Webinar	67
11/7/2018	Laws and Rules Update Webinar	90
12/4/2018	Laws and Rules Update Webinar	92
1/23/2019	Laws and Rules Update Webinar	103
2/21/2019	Laws and Rules Update Webinar	104
3/12/2019	Laws and Rules Update Webinar	94
3/27/2019	Sterile Compounding Webinar	10
4/10/2019	Laws and Rules Update Webinar	121
4/18/2019	PMP Webinar	22
5/22/2019	Laws and Rules Update Webinar	113
6/6/2019	Laws and Rules Update Webinar	76
6/18/2019	Sterile Compounding Webinar	18
7/17/2019	Laws and Rules Update Webinar	171
7/25/2019	PMP Webinar	51
8/28/2019	Laws and Rules Update	181
<b>TOTAL</b>		1,410