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Iowa Board of Pharmacy

BEFORE THE PHARMACY BOARD OF THE STATE OF IOWA

IN THE MATTER OF

Hy-Vee Pharmacy 1224
License No. 5416

RESPONDENT

CASE NO.: 2023-0099

COMBINED STATEMENT OF
CHARGES, SETTLEMENT
AGREEMENT, AND FINAL ORDER

COME NOW the Iowa Board of Pharmacy ("Board") and Hy-Vee Pharmacy 1224 ("Respondent"), and enter into this combined Statement of Charges, Settlement Agreement and Final Order ("Order") pursuant to Iowa Code sections 17A.10(2), 272C.3(4), and 272C.10 and 657 IAC 35.5.

A. BACKGROUND

1. **Iowa License.** Respondent was most recently issued Iowa pharmacy license 5416 on November 21, 2023. Respondent's Iowa pharmacy is active and will next expire on December 31, 2024.
2. **Practice Setting.** Respondent was an Iowa-licensed pharmacy located in Grimes, Iowa, during the time period relevant to these allegations.
3. **Jurisdiction.** The Board has jurisdiction in this matter pursuant to Iowa Code § 155A.
4. **Stipulated Facts.** On or about the date of May 29, 2023, the Respondent pharmacy dispensed an incorrect prescription to patient L.T.

B. STATEMENT OF CHARGES

COUNT I

5. Respondent is charged under 657 IAC 36.6(41) with dispensing an incorrect prescription.

C. SETTLEMENT AGREEMENT

6. Respondent acknowledges that the allegations in the Statement of Charges, if proven in a contested case hearing, would constitute grounds for the discipline agreed to in this Order.

7. In order to resolve this matter without proceeding to hearing, Respondent agrees to the following conditions:

a. Respondent shall pay a civil penalty in the amount of two thousand five hundred dollars (\$2,500.00).

b. Respondent shall ensure all permanent pharmacy technicians and pharmacists complete the continuing education program "Patient Safety: Your Personal Medication Error Rate: Checkpoints and Reality Checks" provided by U Conn School of Pharmacy. The continuing education provided in this program shall be in addition to any continuing education completed for pharmacist license renewal.

8. In accepting this combined Statement of Charges, Settlement Agreement, and Final Order, Respondent acknowledges the following:

a. This Order is subject to the approval of the Board and will have no force or effect if it is not accepted by the Board.

b. Counsel for the State will present this Order to the Board *ex parte*.

c. I have the right to be represented by counsel in this matter.

d. I understand I have an opportunity to be heard and to contest the allegations against me in a formal hearing before the Board and that by waiving the formal hearing, I waive my right to challenge the allegations against me and all attendant rights, including the right to seek judicial review of the Board's actions.

e. I waive my ability to review the investigative file in this case.

f. I understand this combined Statement of Charges, Settlement Agreement, and Final Order will be part of the pharmacy's permanent licensure file and may be considered by the Board in determining the nature and severity of any disciplinary action to be imposed in the event of any future violations.

g. I am voluntarily entering into this combined Statement of Charges, Settlement Agreement, and Final Order.

h. Failure to comply with the provisions of this combined Statement of Charges, Settlement Agreement, and Final Order shall be grounds for further disciplinary action pursuant to Iowa Code § 272C.3(2)(a).

i. Respondent understands that the Board will report this Order to the National Association of Boards of Pharmacy ("NABP") Clearinghouse. The report to the Clearinghouse will reflect the language included in this Order.

12. This combined Statement of Charges, Settlement Agreement, and Final Order constitutes discipline against Respondent and is the final agency action in a contested case pursuant to Iowa Code section 17A.10.

13. This combined Statement of Charges, Settlement Agreement, and Final Order shall not preclude the Board from taking additional action against Respondent should Respondent violate laws, rules, or standards of practice administered by the Board in the future.

14. This Statement of Charges, Settlement Agreement and Final Order becomes a public record available for inspection and copying upon execution in accordance with the requirements of Iowa Code Chapters 17A, 22, and 272C.

15. The Board's approval of this Order shall constitute a **Final Order** of the Board.

D. FINAL ORDER

IT IS THEREFORE ORDERED:

Respondent shall complete the following terms and conditions:

- 1) **Civil Penalty.** Within thirty (30) days of this Order, Respondent shall pay a civil penalty in the amount of two thousand five hundred dollars (\$2,500.00). The check shall be made to the "Treasurer of Iowa" and shall be deposited in the general fund.
- 2) **Continuing Education.** Within ninety (90) days of this Order, Respondent shall submit documentation of the successful completion by each permanent pharmacy technician and pharmacist of the continuing education program "Patient Safety: Your Personal Medication Error Rate: Checkpoints and Reality Checks" by U Conn College of Pharmacy.

FOR THE RESPONDENT:

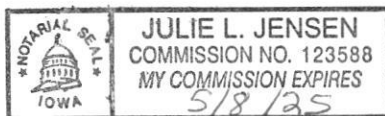
Voluntarily agreed to and accepted by Hy-Vee Pharmacy 1224 on this 18th day of March, 2024.

Emi Ann Pharms
By: Hy-Vee Pharmacy 1224, Respondent

State of Iowa

County of Polk

Signed and sworn to before me on this 18th day of March, 2024, by:



Julie L. Jensen
Notary Public, State of IOWA
Printed Name: Julie L. Jensen
My Commission Expires: 5/8/25

FOR THE IOWA BOARD OF PHARMACY:

Voluntarily agreed to and accepted by the **IOWA BOARD OF PHARMACY** on this
7th day of _____ May, 2024.



Chair
Iowa Board of Pharmacy