STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

DRUG WHOLESALE DISTRIBUTOR ADVISORY COUNCIL
CONFERENCE CALL

The above entitled panel convened via conference
call in Tallahassee, Florida, on the 30th of January,
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Reported by:
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FOR THE RECORD REPORTING TALLAHASSEE, FLORIDA 850.222.5491
APPEARANCE OF PANEL MEMBERS:

STEVE MAYS, CHAIR
JEENU PHILLIP, VICE-CHAIR
JOSEPH LAVINO
MICHAEL MONE
SCOTT BROCK
DEAN ELLIS
JENNIFER GOLDMAN, M.D.

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WALTER COPELAND, DIVISION DIRECTOR
TIM PAGE
RENEE ALSOBROOK
STEPHANIE PRINE
REBECCA BURNETT
BRYANT WOMBLES

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PROCEEDINGS

MR. MAYS: All right, well, good morning everyone, this is Steve Mays, I would like to call this meeting of the Drug Wholesale Distributor Advisory Council to order. Do we have a court reporter on the line?

COURT REPORTER: Yes, sir, good morning.

MR. MAYS: All right, good morning. I want to first of all remind everyone, you know, this is a conference call, so please identify yourself before you speak so the court reporter will know who is speaking for the record. And for everyone on the line, if you're not speaking, try to mute your line, and do not put us on hold, whatever you do, because we don't want to listen to anyone's marketing music or anything like that. Well, Ms. Prine, I think we're ready for a roll call.

MS. PRINE: All right, good morning, Council Members. Do we have Steve Mays?

MR. MAYS: Yes, here.

MS. PRINE: Jeenu Phillip?

MR. PHILLIP: Present.

MS. PRINE: Joseph Lavino?

MR. LAVINO: I'm here.

MS. PRINE: Michael Mone?
MR. MONE: Present.

MS. PRINE: Scott Brock?

MR. BROCK: Present.

MS. PRINE: Arlene Elliott? Dean Ellis?

MR. ELLIS: Present.

MS. PRINE: Jeffrey Tuller?.

MR. TULLER: Present.

MS. PRINE: Patrick Barnes? Peter Hart?

MR. HART: Present.

MS. PRINE: Jennifer Goldman.

DR. GOLDMAN: Present.

MS. PRINE: And just a double-check, do we have Arlene Elliott on the line? Or Patrick Barnes on the line?

MR. BARNES: Yes, I've joined.

MS. PRINE: Okay, we have a quorum.

MR. MAYS: Can you let us know who all is there in the room from the DBPR staff?

MS. PRINE: Oh, yes, I'm sorry. We have Director Walter Copeland; Compliance Manager Reneé Alsobrook; myself, Stephanie Prine. We also have guest Bryant Wombles with our technology team. We have Processing Supervisor Rebecca Burnett, and Deputy Secretary Page -- Tim Page.

MR. MAYS: Great. Thank you. Thank you.
Okay. We're going to -- you know, under Tab 1 you'll find the Chair's report which includes transcript of our September 12th meeting for informational purposes, so if you get a chance, you can review that.

Next you will find a section of the Florida statutes describing the make-up of the Drug Wholesale Advisory Council, so I'm going to refer you to that section and I'm going to read -- as usual, I'd like to start the meeting off by reading the goals of the Council under Paragraph 3. And then again just take an opportunity to read that whole section, it's right at the end of Tab 1 right before you get to Tab 2.

So "The Council shall review this part and the rules adopted to administer this part annually; provide input to the Department regarding all proposed rules to administer this part; make recommendations to the Department to improve the protection of prescription drugs and the public health; make recommendations to improve coordination with other state's regulatory agencies and the federal government concerning the wholesale distribution of drugs; and make recommendations to minimize the impact of regulation of the wholesale distribution industry while ensuring protection of the public health."

So before we get -- move on, we're going to
have a little change in the agenda because of some scheduling issues for the Department, so we're going to go ahead and skip to Tab 2 and then we'll come back and finish up Tab 1 after the director has finished with Tab 2. So Mr. Copeland, I'll turn it over to you at this point.

MR. COPELAND: All right, good morning Council Members, Walter Copeland. I'll give you a quick update on Florida's prescription drug importation bill that was entered into law in June of '19, and also we're going to give you a quick overview of how that relates and connects with a recent notice of proposed rule making as released by HHS.

And so I wanted to just, real quick, give you a high-up summary of the HB-19 law Florida has; and I know we've addressed this in prior meetings, but I think this will just remind you of some of the key points.

Again, the law was signed by the governor in June of '19 and creates two programs for the importation of drugs into Florida. The first program is the International Prescription Drug Importation Program, and that program is administered under this agency, the Department of Business and Professional Regulation. The second program, the Canadian
Prescription Drug Importation Program, is administered under Florida's Agency for Health Care Administration.

Real quick, each program that -- our International Prescription Drug Importation Program, as entered into law, provides a path for the importation of qualifying prescription drugs into the state from foreign countries qualifying under the law, upon approval by HHS. This legislation has required -- it requires us, in conjunction with the Department of Health in Florida, to negotiate for the approval of such pilot program with the federal HHS.

The Canadian prescription drug importation, as administered under the Agency for Health Care Administration, is limited to importations from Canada -- and Renée, interject if I misspeak on this, but it only relates to prescription drugs that are delivered -- or distributed and prescribed through state programs such as the Department of Corrections, the facilities, the state health department and such --

MS. ALSOBROOK: Yes, sir.

MS. COPELAND: Okay. To date, the Division of Drugs Devices and Cosmetics here within the DBPR has worked in conjunction with the Department of Health in the development of a document that we could
use in our negotiations of our international
prescription drug importation program with HHS. And
that's been a progression that's gone several months.

And as we get it -- as we work towards the
end of completing that, as most all of y'all know, FDA
and HHS, on December 23rd of '19, published a notice
of proposed rule making where they're outlining two
proposed safe importation plans for the importation of
prescription drugs.

What we're having -- not knowing the time
line or having any indication on when a final rule may
be developed by HHS, we're having to kind of revamp in
our approach and kind of look at reconciling the
requirements under the state law as passed -- as
entered into legislation under HB-19, and work in
conjunction with what the notice of proposed rule
making from HHS says. And so we're working right now
with Department of Health, with the Agency for Health
Care Administration, and planning for a revision of
that document to reflect the proposed rule making;
with the realization that we don't know what the final
rule will say, but after comments are submitted.

So I know that might be -- I hope it made
sense, and -- but that's just kind of a broad-brushed
update of where we stand and how our process and
planning has been realigned upon the notice of
proposed rule making that came from the federal
government.

And Chief Alsobrook has led this project, so
she's much more into details than I am, so if there's
anything we can try to answer, find an answer and get
back with y'all later, we'll be glad to do that, but
that's a broad-brush summary.

MR. MAYS: Any questions from council
members?

MR. BARNES: Mr. Chair, this is Patrick.
MR. MAYS: Go ahead, Patrick.

MR. BARNES: I just wanted to paraphrase kind
of what I heard. So on the international line, the
federal government has issued some proposed rule
making, but looking at that proposed and comparing it
to how the law was passed here in the State of
Florida, there seemed to be some conflicts. And
currently what the state is doing is working on how
the law was passed and trying to become in line with
the proposed rule with not knowing whether it's going
to be the final rule or not; is that kind of what I
heard?

MR. COPELAND: Chair, this is Walter. Yes,
that's a good summary right there. And also take in
mind that I failed to mention there is a 75-day period
where comments can be submitted related to the
proposed rule, and we are working again in conjunction
with Department of Health, the Agency for Health Care
Administration, and the Executive Office of the
Governor to determine if we're going to develop
comments to submit that may help align those points of
our state law with the federal law, should it be able
to be revised.

MR. BARNES: When does the 70-day comment
period end?

MR. COPELAND: It would be the beginning of
March, I believe it's March the 9th. Chief?

MS. ALSOBROOK: I think March the 9th is --
this is Renée, I think March the 9th is accurate,
Director.

MR. MAYS: And Walter and Renée can you -- is
there any way -- do you have enough to kind of give us
a high level maybe where you see some of the
differences, maybe some more specifics, or is it too
early for you to get into that detail?

MR. COPELAND: Chair, this is Walter, Renée
we got some broad-brushed ideas --

MS. ALSOBROOK: We can give you a couple
things, I think, and you know, we're still analyzing
it, but a couple things are the -- and remind everyone
this is a notice of proposed rule making, so
substantial changes could occur. The difference
between House Bill 19, which is of course now, and
Chapter 499 -- if you have a copy of that, you've seen
it -- is the proposed rule would require a state or
territorial government or tribe to be a sponsor, which
you know, that isn't necessarily a requirement of the
AHCA portion of the statute. It also further
restricts the eligible drugs from the statutory
provision. It limits the project to two years and
requires requests for extensions.

Under the DEC program, DOH DEC program, it
appears to restrict it to Canadian drugs. That's the
point that we're continuing to research substantially.
And it limits the number of folks involved, foreign
sellers, manufacturers involved, to a certain number
of parties. It provides the methodology for getting
the drugs in to the country, so it actually has a
process where the bill did not actually have that
process.

So the rule kind of sets out a procedure to
be followed where the bill really didn't, it's really
created a licensure provision for international
wholesale distributors, and export pharmacy, and more
provided a framework; where the rule actually kind of
sets out a process for it.

So it has more I guess you would say
restrictions and requirements under the statute.
That's not uncommon. As you know, working in
government, you usually get legislation that provides
a broad brush, and then the rules come in and provide
the details, and that's kind of what's happening here.
But it does appear to provide substantially more
restrictions than the house bill did. Does that help?

MR. MAYS: Thank you.

MR. BROCK: Mr. Chairman, this is Scott
Brock.

MR. MAYS: Yes, Mr. Brock?

MR. BROCK: This is Scott Brock. Renée, do
you think that those differences would require Florida
to go back in and the -- the legislature to go back in
and amend the statute?

MS. ALSOBROOK: Well, that's the big thing
that the director was talking about we're trying to
work with DOH and our senior management on trying to
make a decision about whether legally that would be
required or, you know, can we function within what
they're now to -- I mean, I think we can work within
the current law and this notice of proposed rule
making, I just don't think that we can implement the entirety of the statute with the rule that's being proposed. So that's kind of our dilemma.

We seem to have been directed to do international importation; "international" implied to me "bring drugs in from more than Canada." As you look at the notice of proposed rule making, it seems to only want to implement the provision that brings it in from Canada. So to me, that seems to be the biggest conflict between House Bill 19 and the notice of proposed rule making.

So to simply answer your question, if they wanted -- if the legislature really wants, you know, drugs brought in from, for example, Ireland, this rule does not appear to me to accomplish that; but I have to take my lawyer hat off and say, you know, we've ask that question of the lawyers here and they're going to have to answer that for us.

But simply to respond, no, I don't think we have to go back to the legislature to be able to respond to the notice of proposed rule making, comment on it; nor to present a demonstration project, if that's what the executive office wants us to do. I think we do have the authority under existing legislation to present a demonstration project that
would comply the federal rules under existing state law.

MR. COPELAND: And this is Walter, and to reflect on Renée's comments, I know that that has not been our plan of movement right now to suggest any legislative adjustments --

MS. ALSOBROOK: That's correct.

MR. COPELAND: -- it's just -- yeah.

MS. ALSOBROOK: That's correct.

MR. PHILLIP: Chairman, this is Jeenu.

MR. MAYS: Yes, Jeenu, go ahead.

MR. PHILLIP: Thank you. This question is for Renée. So I guess, how does this all tie in with the QSA? I thought my understanding was that for drugs that would be coming in from Canada, they don't have any such track-and-trends requirements, and my understanding was that the propose will rules would require traceability, you know, back to the source. So is this all moot if, you know, Canadian products won't have that traceability?

MS. ALSOBROOK: No, sir, Mr. Phillip, the proposed rule actually requires -- not only does the federal law, but also the proposed rule will require that the importer encode the products with a product identifier and comply with the DCSA.
There are provisions that would require, you know, training partners be authorized; there's substantial provisions within proposed rule to make the products coming in to Canada be repackaged, be labeled in accordance with U.S. standards, have product traceability in accordance with the U.S. standards; have NDC codes on them in accordance with U.S. standards. In other words the equivalent of U.S. products.

They're already after the NDAs, ANDAs, and the otherwise products that would be sold in the United States. Now, obviously they're coming in with a Canadian DIN number to a repackager and then would have be repackaged and be properly labeled with a U.S. documentation and DSCSA requirements; but the rule appears -- and it's a huge rule there's 120-something pages if you read the federal rules, they talk about it a bunch, then they give you the language, then they talk about it some more -- but it does seem to attempt to not undermine the requirements of current U.S. wholesale distributors to make the products coming from Canada comply with the U.S. DSCSA standards, including recall standards and notification standards.

MR. PHILLIP: Right, I guess I get that, my understanding was that Canada doesn't have those
requirements so --

MS. ALSOBROOK: That's correct.

MR. PHILLIP: Yeah, so if they don't, then I guess, you know, where -- unless they went ahead and changed their entire process, you know, wouldn't this seem like there's no -- the source is not eligible in essence?

MS. ALSOBROOK: Well, I (inaudible) the drug is an unauthorized or unapproved source, that's a question, I think, that is right for discussion during the rule making process.

MR. PHILLIP: Okay.

MS. ALSOBROOK: Not questioning of the legitimacy of your question.

MR. PHILLIP: Right. Got it. Thank you.

MR. MAYS: Yeah, Jeenu, this is Steve, my understanding is, just from talking to, you know, our trade association and some counterparts that are, you know, working on comments to the federal proposed rule, that there is a caveat to that that I think HHS does have the authority to make exemptions to DSCSA. I think there has to be some sort of financial or budgetary reasons to do that, but they do have that authority that they -- they could choose -- I think it would be pretty heavily resisted, but I think they
could choose to exempt certain parts of it just for these imported drugs. I don't know if that would happen, but I think they're -- they have that authority is my understanding. I don't know, Renée, if you have any more to say on that or not.

MS. ALSOBROOK: I understand that there are some suggestions that some exemptions be created for explain with DSCSA, but that, Chair, is all I know. I don't know much more than that, just what I've been -- I've heard are some of the proposals is that some exemptions be created for it.

MR. MAYS: Okay, thank you.

MS. ALSOBROOK: I'm very interested, and waiting to hear and read the comments.

MR. MAYS: Yeah, it's going to be an interesting time. Any other questions from council members?

MR. PHILLIP: I guess Chair --

MR. MAYS: I'm sorry, Jeenu? You have another one?

MR. PHILLIP: Yeah, just a comment. I was at -- this week I was at the NABP member forum up in Chicago, and at the member forum there were a few Canadian pharmacists in different practice settings, and this topic came up for a tiny bit.
So they -- all of the Canadian pharmacists expressed concern because of the -- you know, the current, I guess, shortages that are in place already in Canada, and they don't understand how this program really could be effective because -- just because of that reason, you know, that starting point. Just a comment to make.

MR. MAYS: Yeah, I -- you know, and again, this is my personal opinion, I'm sure there's a finite supply of drugs in Canada, so I doubt that they're -- Canada is going to allow the drugs in Canada to get sucked into the United States, so -- and then their own citizens not be able to get them, so I think they could end up taking some action at some point, but that's just my personal opinion. Anybody else have any questions on the council?

MR. TULLER: Yeah, Council Chair, this is Jeff. I have one quick question for Renée in regards to --

MR. MAYS: Go ahead, Jeff. Go ahead, Jeff.

MR. TULLER: What I've read in here, Chief, is that there is the importation occurs, and it's -- it's (unintelligible) to go to a foreign trade zone. Could you just shed a little light on what that means, the foreign trade zone? Is that the only people that
would be recipients of the importation, that being the re-labeling and meets the standard that we talked about?

MS. ALSOBROOK: Well, they also allow for reconditioning, but generally speaking, as you know, that's kind of like a customs zone --

MR. TULLER: Yes.

MS. ALSOBROOK: -- where they bring -- yeah, where they bring drugs in and they're held in a -- basically a international zone that we got, I don't know, 17, 20, a hundred free trade zones in Florida; a bunch.

And it's supposedly, you know, a pretty-protected area where it can't be brought into commerce until they meet the requirements for importing a drug into the United States. And custom agents are then -- you know, custom processes are then honored, information's entered into the U.S. customs requirements by computer, it's -- I'm not suggesting they're physically inspected, they're not -- and then those --

MR. TULLER: Right.

MS. ALSOBROOK: -- those documents are processed electronically and then the drugs are released.
MR. TULLER: Right.

MS. ALSOBROOK: Generally speaking, you would -- what I read in the rule is that you would affirm that you've relabeled the product; the product meets the requirements that's set forth in the rule; you've repackaged them; you got them from the source that you were supposed to get them from; you have the appropriate licensure; you met all the requirements that are set out in the rule, and you're bringing them in.

That, you know, globally and generically, is what you would be doing from a free trade zone. We have multiple free trade zones in Tampa, Fort Lauderdale, Miami, et cetera. I don't think that they're big, locked warehouses or anything like that, I think that they're -- they're at ports, generally speaking. And --

MR. TULLER: Chief, we actually set up one of these in Tennessee --

MS. ALSOBROOK: Yes.

MR. TULLER: -- and it took a while to have this done, so reading this law, it seems to be that everything is being directed into these foreign trade zones where they get further inspection, you know, for the actual testing and the labeling and all that.
That -- I just wasn't sure of how that works.

MS. ALSOBROOK: Yes.

MR. TULLER: Thank you --

MS. ALSOBROOK: Yeah, because they want the testing to be done in the United States with qualified U.S. laboratories, and I don't think there's any way to accomplish that unless you get them in. I think that was the thought process, Mr. Tuller, is you've got to get it here before you can get it to a U.S. laboratory for testing. You know, I don't know if that's true or not, but you know, it depends on how you read -- yeah, it's pretty much the same way with reconditioning I think, but --

MR. TULLER: Yeah.

MS. ALSOBROOK: -- yeah, that's the theory.

MR. TULLER: Thank you.

MR. MAYS: Thank you. Okay, any other questions from council members? Okay, are there any questions from other interested parties on the line before we move on? Okay, Mr. Copeland, I think we can move on.

MR. COPELAND: Yeah, great. That was good input, everyone, on the HB-19, I appreciate that.

Item B, Controlled Substance Reporting, again, we have Bryant Wombles who's part of our DDC team and works
on -- in conjunction with our agency's IT division, so we've asked him to set in and give the council a quick update related to the Controlled Substance Reporting. Bryant?

MR. WOMBLES: Good morning, council members, I'm sure many of you are aware from past meetings that D -- (inaudible) has been working on a new Controlled Substance Reporting system to use for your controlled substance reporting. Basically we're building upon the existing system. I know a lot of the industry members say that ours is one of the more-friendlier systems with the State, so when we were creating the new system, we kept that in mind and wanted to try to keep a system that wasn't creating any additional burdens on everyone that's already reporting.

We've been beta testing with folks from Woodville, AmerisourceBergen, and Neon Therapeutics and been having successful results, so we're pretty confident that we'll be able to roll this new system out to the industry sometime this year. We don't have an exact date, yet, but we will roll it out with an implementation plan that will give the industry a heads-up in time to be able to introduce the system to them and look at it, review the training materials, and be familiar with it by the time we actually go
live and switch from the current system to the new system.

The systems are both very, very similar, the big difference is our new system has a lot more friendly interface for the controlled substance reporters. It will make it easier for them to be able to go in and look at their data, upload their reports.

One of the new features the new system is going to have that's actually going to be very nice, is they now have the search function in it, so you'll be able to review your past reports and your reports that you're submitting. Right now, the current system basically just gives you your file name that you uploaded, and now you'll actually be able to see what was in that file, all your historical data.

The new system also will allow you to make your corrections for your errors and warnings from within the system, instead of having to go in and submit newer error reports and, you know, the current system's -- you know, with the .tst file. This will let you actually make individual corrections, so that aspect of it's going to be a lot more user-friendly, too.

Right now, we're in the process of getting the training materials ready and a user guide for the
updated stuff; once we have that, then we'll be getting a plan together as far as getting with the industry, rolling that material out to everybody, giving everybody a chance to get familiar with it, and everything. And then that way, when we go live everybody will be ready to go.

The new system will have some more-stringent registration requirements for new users. Now a letter from the company that authorizes that person to be a reporter is going to be required, and a few steps like that. What we're suggesting to everybody is when the new systems goes live, we're going to roll all the existing users over to the new system, and the only thing that's going to be required out of those users that are already current registered users is they'll just have to update their password once, and they'll be able to use the new system.

So our recommendation that we're giving to everybody is if you're going to have anybody that's going to be a controlled substance reporter, it's probably best to go ahead and register now while we're on the old system, that way whenever the new system rolls out, they'll already be in place, and all they'll have to do is the password update; because once we go live on the new system, the new

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registration requirements will be in place. So that would be our best recommendation for anybody, you know, as far as the easier version of the registration. But we're looking forward to getting this out to everyone so that, you know, it makes easier on the industry to do your reporting.

MR. COPELAND: And this is Walter, Bryant, thank you, and I know they may have questions, but I did want to interject and just say we do appreciate all of those that have participated in the beta test, it's been a great help, and I know the input's been very appreciated.

MR. MAYS: Great. Any questions from council members?

MR. PHILLIP: Yes, Chair, this is Jeenu Phillip.

MR. MAYS: Go ahead, Jeenu.

MR. PHILLIP: Thank you. Yeah, just -- I guess just a quick question: Is there any downstream affect to pharmacies as a result of the --

MR. WOMBLES: There shouldn't be -- it shouldn't be any changes from the current system, the only real changes that are going to be visible would just be in the registering new reporters; and in the interface of the system itself where they're actually
going in and clicking around within the web page; and then the added search capabilities. As far as everything else, it's going to be the same as your existing stuff, so there's no new changes outside of what the existing system and system requirements are.

MR. PHILLIP: Thank you.

MR. MAYS: Any other questions, council members, or any other parties on the line? We'll move on to the next topic.

MR. COPELAND: Renée, did you have something --

MS. ALSOBROOK: Yeah.

MR. COPELAND: -- want to interject real quick?

MS. ALSOBROOK: Chairman, if I might, to be clear in response to that question, Mr. Phillip, if the pharmacy is a retail pharmacy drug wholesale distributor, and there are a few pharmacies that do all that DDC permits, they would be a mandatory reporter because they do receive controlled substances, and they could -- you know, if they are currently registered, the impact would be, you know, that if they don't register now, it would be a little more difficult for them to register. So if they would take, you know, Bryant's advice and go ahead and
register now, it will be a lot easier for them to get registered into the system.

So the only downstream impact would be, you know, a little more difficulty registering into the system if and only if they hold that DDC retail pharmacy wholesale distributor permit that's issued by the Division. But some of your pharmacies do hold that permit, so I wanted to be clear that that is a potential downstream impact.

MR. PHILLIP: Got it, thank you so much.

MS. ALSOBROOK: Yes, sir.

MR. MAYS: Any other questions? Mr. Copeland I think you can move on.

MR. COPELAND: All right. This is Walter. Item C I just wanted to quickly address council member terms and application process, if we need to do a little bit of planning and looking at that. But the council members, as y'all are well aware under the statute, requirements are to -- specifically limited to certain industry segments, and of course, all qualifying individuals for any open position, including all of your members who may be rolling off are encouraged to apply for upcoming open positions.

And we want to just document it on record that this process can be accessed as well as the
application for qualifying individuals on the Florida Department of Business and Professional Regulation web site. And within the web site, is -- there is a Division of Drugs, Devices and Cosmetics section where there's more information related to those that may be interested. And our web site is, you know, www.floridalicense.com. And also, anyone interested can contact Stephanie Prine, and Stephanie's phone number is (850) 717-1816.

And I will follow up with the Chair, and we will -- moving forward, we just wanted to be cognizant, and you know, we've had a -- I'm a new Director, we've had a lot of changes over the past month, and I just didn't want this to slip behind us, so that was just a quick update.

MR. MAYS: Okay. Anybody have any question?
Okay. Thank you, Mr. Director.

MR. COPELAND: Thank y'all.

MR. MAYS: If I could, I'd like to move back up to the agenda under Tab 1. We've had a proposal to consider changing -- as we all know, we have a schedule now to have two in-person and two conference call meetings per year. And we've had a proposal to reduce the in-person meetings to one, and change it to three conferences calls and one in-person meeting.
And I just want to open that up for discussion to see if anybody had any strong thoughts either way, then we could take a vote.

MR. BARNES: Mr. Chair, this is Patrick, if I --

MR. MAYS: Go ahead.

MR. BARNES: This is Patrick. Yes, if I recall, we used to have one person and three conference calls, and then we decided to move it to two to two. I'm thinking it was around the DQSA, but I'm not sure. Do you recall why we went from one in-person to two?

MR. MAYS: No, I do not. I surely don't. I know that there was -- you know, back in the early period after the council was formed, you know, there was a lot going on with -- you know, with Florida and then with DQSA, you know, being passed. There was a lot of discussion to be had, and you know, there may have been some interest in having, you know, more face-to-face. And I think -- and Walter you're -- feel free to jump in, I think there was just a concern for, you know, the inconvenience and travel costs and all that for members to have to travel to, you know, Tallahassee twice a year.

My personal feeling is I'm neutral on it, I
don't mind the two in-person, but I'd probably, you know, prefer the one; but I'm very open to whatever the rest of the council feels strongly about. But anyway, to answer your question, I don't really recall the reasons. I thought it had been two apiece all along, but that may have been before my time.

MR. COPELAND: And Chair, this is Walter Copeland, we -- and again, I'm new, so we're -- we're like you, obviously we'd love to see all y'all in person, but we're indifferent. And I think it's just one of those things, throw a decision out there that you hadn't had in a while, just to see if there needs to be anything realigned.

So again -- and we're totally -- we appreciate y'all's volunteering and doing this, so we just want to make sure it's designed and handled based on what works best for the consensus of all the council members.

MR. MONE: Mr. Chairman?

MR. MAYS: Yes, sir?

MR. MONE: Michael Mone. Given the nature of what's about to happen with importation, I'm not sure that now would be the right time. I have a funny feeling that we're going to be actively engaged in a lot more discussions in the short term. This might --
I agree with the analysis of reducing it to one, but I'm willing to believe that right now it might involve more work on our part remotely that could be accomplished better in person, but that's just my thought.

MR. MAYS: Okay.

MR. ELLIS: Mr. Chairman, this is Dean Ellis.

MR. MAYS: Yes --

MR. ELLIS: At the beginning of this council, I think we had a requirement to have one in-person meeting per year. I'm not sure when it got changed to two, but why couldn't we just go ahead and go with the one meeting per year, and then change the schedule as needed if we do need to meet in person?

MR. MAYS: Again, I think Michael makes a good point, and I think that's also a good comment. You know, we -- I think -- you know, Walter, I, again, don't want to inconvenience the Department, but maybe that's what we do: Maybe we deal -- we'll just be flexible with the schedule, and maybe we default to one in-person, and then if we feel that an in-person -- another one is warranted, that we just change the schedule, or at least, you know, mix it around.

MR. COPELAND: Chair, this is Walter
Copeland. Yeah, I agree with -- both those are good comments. And again, it's not an inconvenience on our end one way or the other at all. So I think that makes good sense, and I think we can all identify when we have a time that we need to change it. So we're -- that's absolutely no problem on our end.

MR. MAYS: Mr. Mone, are you okay with that approach?

MR. MONE: Certainly, Mr. Chairman.

MR. MAYS: Any other --

MR. HART: Chairman, this is --

MR. MAYS: Yes, go ahead.

MR. HART: Mr. Chairman, this is Peter Hart just as a question -- hello, sir -- just as considering Mr. Mone's comments, and I think they're valid, and I think we will run into this as we go forward where we will have extraneous circumstances that may promote the need for face-to-face, because I think this group all can attest that there are times when the single-most effective way to accomplish things is face-to-face.

So what if we -- is it possible to consider a hybrid of the process of saying we do the one in-person and the three teleconference; but in the example of Mr. Mone's, I agree that as this regulation
moves forward in development, what is the limitations we have to schedule additional meetings? To say we will have our three normally-scheduled calendar events that we set at the beginning of the year, but be able to have ad hoc in-person meetings as necessary? Is that something that lies within the capability of our charter?

MR. MAYS: I'll defer to Mr. Copeland for that one, I'm not really sure about that.

MR. COPELAND: Let me -- and I'm going to ask for Chief Alsobrook's input also, but I would think a council member could make a motion and vote on it just to handle it that way. But I -- the statute's pretty vague.

MS. PRINE: The statute just says that you guys have to meet once each calendar quarter. It doesn't say in-person, or not, and it doesn't say that you can't add additional. So as long as we cover the one-per-quarter, we've met the statutory requirement.

MS. ALSOBROOK: Chairman, this is Renée, the only restriction in reference to Mr. Hart's inquiry is that you provide notice timely to the public that you are having a meeting so that the public may call in, or as Mr. Marty Dix did today, show up in person.

So we would only -- if you wanted to have an
extra meeting, we couldn't do it, you know, the next
day, but with properly filing notice which requires
seven days, and I think you have to post it, what,
five days ahead of time, something like that -- how
many days would they have to tell us ahead of time
they wanted a meeting, 14 days?

MS. PRINE: Yeah, that would be comfortable.
That would be comfortable.

MS. ALSOBROOK: Stephanie and the Director
would need you to tell us about two weeks before you
wanted to meet that you wanted to have a conference
call meeting, and if you did that, then you could have
a meeting in 14 days after you just -- you know, you
told us you wanted it.

So we would have the scheduled meetings
because that allows everybody to put them on their
schedules, but if there was some emergency -- you
know, the rule goes out federally and y'all wanted to
talk about it, and it was a important enough that the
Chair wanted to hold a meeting with the council to
talk about it -- you give the director a call, you say
we want a meeting on such-and-such a day, and then
Stephanie provides the notice -- I think it's the
Florida Administrative Weekly -- and then we have the
conference call meeting for that particular event.
That could be the fifth meeting that year or the tenth meeting that year, whatever, you know, is the council's desire. So there's no limitation on the number of meetings, there's just a requirement that you meet quarterly, does that answer your question?

MR. MAYS: Yeah, and Mr. Hart, I was just looking at the statute, it does say the council shall meet at least once each quarter, so it does definitely allows for more-frequent meetings if you need to have -- if we need to have them as long as the --

MR. HART: -- this is --

MR. MAYS: -- proper notices are made.

MR. HART: Thank you. I was just trying to throw out an alternative that -- you know, as the need arises. Because we may run into -- on the federal level, you know, with their announcement of rule making that comes out twice a year, so in the spring time there's a likelihood they could defer again and make it even more interesting. So who knows?

MR. MAYS: So the bottom line is it sounds like we've got some flexibility to do what we need to do if we need to meet more often, we can have, you know, infrequent calls, again, or in-person, so I think we've got some flexibility as long as the, you know, the proper notifications are made. So I think
we're good with that. So any other comments, questions?

Okay, so I'm going to propose that we vote on changing the schedule to one in-person and three conference calls instead of the two each. So all in favor say aye.

(Chorus of ayes.)

MR. MAYS: Any opposed? Okay, we have -- I think we have a vote. So we will -- I guess our next decision is -- and I'm not really sure -- Stephanie maybe you know -- can remind me which of the four scheduled meetings for 2020 is right now -- is currently scheduled to be the in-person, or which two if you don't --

MS. PRINE: We don't -- we don't have --

MS. ALSOBROOK: Didn't pick one.

MS. PRINE: We didn't pick one. So we were going to leave this up to you guys since y'all are the ones that travel. These were just some dates that Walter and I looked at, sticking with the Thursdays, you know, through the calendar, so they're -- the dates are somewhat flexible as well.

MR. MAYS: Okay. I'll ask the council does anyone have any preferences or any dates they want to stay away from as an in-person date?
MR. HART: This is Peter Hart, probably as a pragmatic for all of us and travel costs and budgets, it's probably better we have the in-person one in the first half of the year than in the second half.

MR. MAYS: Okay. How about March? Does that -- how about the March date? Does that work for everyone since it's been a while since we met in person?

MS. ALSOBROOK: This is Renée, I was asking if session would be over, and Stephanie advised that it's just ended, so that might be a good meeting date; this year, anyway.

MR. MAYS: Okay, is anyone opposed to meeting in person on March 26th? I better check my calendar real quick. Yeah, that week's good for me. So all those in favor of having the one in-person meeting March 26 say aye.

(Chorus of ayes.)

MR. MAYS: Anyone opposed? Okay. So we will have our in-person meeting on March 26th. Any other questions? Okay.

Okay, so the last thing we have on the agenda is it is time for -- it is actually time (inaudible) nominations for a chair and vice-chair, and I would like to remove my name for consideration. I think
it's just -- I would -- I've enjoyed chairing the council, but I do think it's good to have new blood once in a while, and have, you know, different people doing things. And I would be staying on as a member, but I would like to take -- withdrew my name from consideration, so I'd like to open it up at this time for nominations for the chair. Do we have any nominations?

MR. BARNES: Mr. Chair, this is Patrick, do we currently have a vice-chair?

MR. MAYS: Yeah, that is Mr. Phillip.

UNIDENTIFIED MALE SPEAKER: Next.

UNIDENTIFIED FEMALE SPEAKER: Next.

MR. MAYS: Next?

MS. ALSOBROOK: I hear all of y'all, this is Renée, everybody volunteering.

MR. ELLIS: This is Dean Ellis, I make a motion that we elect Jeenu Phillip as our next chairman.

UNIDENTIFIED MALE SPEAKER: Second.

MR. MAYS: And we have a second. Okay. All in favor say aye.

(Chorus of ayes.)

MR. MAYS: Mr. Phillip, are you willing to take that position?
MR. PHILLIP: Yeah, that's fine. I guess just to clarify, I don't -- I'm not in the wholesale industry, so --

MR. MAYS: Okay.

MR. PHILLIP: -- expertise in -- you guys are the expert.

MR. MAYS: Well, I just want to -- and again, I meant to say it before we took the nominations, but you know, the chair does not have to be a wholesaler, and I know it's been -- you know, I think traditionally over the years it's been a primary wholesale member, but there's no restrictions that I know of in the statute for -- you know, any member can be the chair, and I think that's very deserving for you, and you'll do a great job.

MR. PHILLIP: Okay, I appreciate it. I'll accept.

MR. MAYS: Thank you. Thank you very much. Do we have nominations for a vice-chair?

MR. ELLIS: Mr. Chair, this is Dean Ellis, I recommend and nominate Mr. Michael Mone as vice-chair.

MR. BARNES: Mr. Chair, this is Patrick, I second the motion.

MR. MAYS: All in favor say aye.

(Chorus of ayes.)
MR. MAYS: Opposed? Mr. Mone, will you accept the vice-chair position?
MR. MONE: Yes, Mr. Chairman, I will.
MR. MAYS: Thank you so much.
MR. MONE: You're welcome.
MR. MAYS: And it has been a distinct pleasure to serve as the chair of the council, and I think it's time to hand it over to someone else, and I think these guys will do a great job.

I've got a lot going on in my business, and I need to devote a little bit more time to it, and again I think the fresh blood will be good. Do we have any other business from the council or the Department?

MR. COPELAND: Chair, this is Walter Copeland, I just want to thank you for your service, and I know everyone here appreciates it. You've been a lot of help in my new role in getting up to speed, and a good sounding board, so I want you to know that, we appreciate it, from the Department's side, very much.

MR. MAYS: Well, thank you very much. Thank you much. Okay. Any other business? Hearing none do, we have a motion to adjourn?

MR. PHILLIP: Motion to adjourn, this is Jeenu Phillip.
MR. MAYS: We have a second?

MR. MONE: Second.

MR. MAYS: All in favor say aye.

(Chorus of ayes.)

MR. MAYS: Opposed? Okay, the meeting is adjourned, thank you. Everyone have a great rest of your winter, and we'll see everyone in March. Thank you.

(The proceedings were adjourned at 10:27 a.m.)
CERTIFICATE OF REPORTER

I, JEFFREY R. BABCOCK, do hereby certify that I was authorized to and did report the foregoing proceedings, and that the transcript, pages 1 through 41, is a true and correct record of my stenographic notes.

Dated this 8th day of February, 2020 at Tallahassee, Leon County, Florida.

[Signature]
JEFFREY BABCOCK

[Notary Public Seal]

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