

AGENDA

TUESDAY, JANUARY 5, 2021

8:30 a.m. – 9:30 a.m.

Executive Committee Meeting

(Executive Committee and Chief Volunteer Officers Only)

9:30 a.m. – 11:30 a.m.

Morning Session and Discussion

(All Attendees)



Jim VandeHei

Co-Founder & CEO of Axios

Co-Founder & Former CEO of POLITICO



Scott Gottlieb, M.D.

23rd Commissioner, U.S. Food & Drug Administration

Partner, New Enterprise Associates

WEDNESDAY, JANUARY 6, 2021

9:00 a.m. – 11:00 a.m.

Association 2021 Priorities Discussion

(Executive Committee, Chief Volunteer Officers, and the Designated Association Staff Member Only)

SPEAKERS



Jim VandeHei

Co-Founder & CEO of Axios

Co-Founder & Former CEO of POLITICO

Jim VandeHei is a media entrepreneur and expert on American politics. He is the co-founder and CEO of Axios, a disruptive media company delivering news and insights on politics, business, media and tech. The company, whose name means “worthy” in Greek, specializes in high-quality news and analysis easily shared among the country’s most influential readers and across social platforms. As CEO VandeHei aims to radically overhaul the traditional media business with a forward-thinking approach to the way viewers consume news in the 21st century. He is also the co-creator and executive producer of Axios on HBO, a documentary-news series that interviews the world’s top leaders and covers the most consequential topics of the day, fusing together the “smart brevity” of Axios’ digital reporting with cinematic, documentary storytelling.

In addition to starting Axios, VandeHei was the co-founder and former CEO of POLITICO, the digital media company that upended and revolutionized political and policy journalism in Washington, New York, and Europe. Called a “media phenomenon” by Washingtonian, the all-politics-all-the-time site has been a smashing success since its 2006 launch. In his nine years at the publication’s helm, VandeHei was a chief architect of both the site’s editorial and business models. Under his leadership, POLITICO expanded into New York and Europe, where it was recently named the most influential publication on the continent for top government officials.

In presentations, VandeHei offers a dynamic, panoramic take on politics, policy, and the art of navigating the modern media madness, and his unique, insightful perspective flows from covering the presidency, campaigns, and Congress for two decades. Exclusively represented by Leading Authorities speakers bureau, he combines the expertise of an on-the-beat political reporter with the entrepreneurial savvy of the man who started two media companies to shine light on what makes the powerful really tick. With a candid, close-up view of what really happens in Washington politics and governance, VandeHei brings a frontline journalist’s insight and insider knowledge to every speech. He is better positioned than virtually anyone else to pull back the curtain and address what audiences really need to know about the White House, Congress, politics, and the media.

Accolades. In 2017, Vanity Fair named VandeHei to its “New Establishment List,” the magazine’s annual compilation of industry titans, and Entrepreneur magazine named him one of the year’s “50 Most Daring Entrepreneurs.” Vanity Fair also formerly listed him among the 100 most powerful “Information Age” thinkers for helping to create “the model for the new media success story.” In 2015, VandeHei and POLITICO co-founder John F. Harris were named the 2015 Editors of the Year by the National Press Foundation. VandeHei was also selected as the first representative of a primarily online news organization to serve on the Pulitzer Board.

The Real News in Real Time. At POLITICO, VandeHei directed the editorial coverage of the largest White House and Congressional teams in the country, and he co-moderated two presidential debates in 2008, including the first debate to incorporate questions voted on by a live online audience.

SPEAKERS



Scott Gottlieb, M.D.

23rd Commissioner, U.S. Food & Drug Administration
Partner, New Enterprise Associates

Scott Gottlieb is a physician and served as the 23rd Commissioner of the U.S. Food and Drug Administration. Dr. Gottlieb's work focuses on advancing public health through developing and implementing innovative approaches to improving medical outcomes, reshaping healthcare delivery, and expanding consumer choice and safety. He is a resident fellow at the American Enterprise Institute and a partner at the venture capital firm New Enterprise Associates.

Dr. Gottlieb is an aggressive advocate for advancing the health of patients, promoting healthcare access, and driving innovation. The agency's historic and prolific advances in new policy distinguished his tenure as the FDA's commissioner, in addition to a record-setting number of approvals of novel drugs, medical devices, and generic medicines. Under his leadership, the FDA advanced new frameworks for the modern and safe and effective oversight of gene therapies, cell based regenerative medicines, targeted drugs, and digital health devices. The FDA implemented new reforms to standardize drug reviews and make historic improvements of post market data collection and the use of real-world evidence. They promoted policies to reduce death and disease from tobacco, improve food safety, and aggressively confront addiction crises.

Previously, Dr. Gottlieb served as the FDA's Deputy Commissioner for Medical and Scientific Affairs and before that, as a Senior Adviser to the Administrator of the Centers for Medicare and Medicaid Services, where he helped advance policies to improve healthcare quality and promote the effective use of new medical technologies. Dr. Gottlieb is widely published in leading medical journals and periodicals, including The Wall Street Journal, The New York Times, and The Washington Post. He has held editorial positions on the British Medical Journal and the Journal of the American Medical Association and is a regular contributor to CNBC and Face the Nation. Fortune Magazine recognized him as one of the "World's 50 Greatest Leaders" in 2018 and again in 2019. In 2018 and then again in 2019 Modern Healthcare named Dr. Gottlieb the "Most Influential Physician Executive and Leaders" in its annual survey of 50 physician executives, and Time magazine named him one of its "50 People Transforming Healthcare in 2018."

Dr. Gottlieb was a practicing hospitalist and he is an elected member of the National Academy of Medicine. He lives in Westport, Connecticut with his wife and three daughters.

ATTENDEES BY ORGANIZATION

(As of December 27, 2020)

AACP

Anne Lin, B.S, Pharm.D., FNAP

President

American Association of Colleges of Pharmacy
Dean, Notre Dame of Maryland University
(Anne)

Lucinda L. Maine, Ph.D., R.Ph.

Executive Vice President and CEO

American Association of Colleges of Pharmacy
(Lucinda)

APhA

Sandra Leal, PharmD, MPH, CDCES, FAPhA

President-Elect

American Pharmacists Association
Executive Vice President, SinfoniaRx, a TRHC
Solution
(Sandra)

Scott Knoer, MS, PharmD, FASHP

Executive VP & CEO

American Pharmacists Association
(Scott)

ASHP

**Paul W. Abramowitz, Pharm.D., Sc.D. (Hon),
FASHP**

Chief Executive Officer

American Society of Health-System Pharmacists
(Paul)

**Thomas J. Johnson, Pharm.D., M.B.A., BCCCP,
BCPS, FASHP, FCCM**

President

American Society of Health-System Pharmacists
Asst. VP-Hospital Pharmacy, Avera Health
(Tom)

ASHP (continued)

Kathleen S. Pawlicki, M.S., R.Ph., FASHP

Immediate Past President

American Society of Health-System Pharmacists
(Kathleen)

Linda S. Tyler, Pharm.D., FASHP

President-elect

American Society of Health-System Pharmacists
(Linda)

AAM

Dan Leonard

President and CEO

Association for Accessible Medicines
(Dan)

Anok Sonig

AAM Board Chair

CEO, US Generics & Global Head R&D &
Biosimilars, Lupin
(Anok)

CHPA

Paul Gama

CHPA Chair of the Board

President – Personal Health Care
The Procter & Gamble Company
(Paul)

Scott Melville, J.D.

President & CEO

Consumer Healthcare Products Association
(Scott)

HDA

Chester Davis, Jr., JD

President & Chief Executive Officer
Healthcare Distribution Alliance
(Chip)

ATTENDEES BY ORGANIZATION

(As of December 27, 2020)

NABP

Jack W. “Jay” Campbell IV, JD, R.Ph.
Chair
National Association of Boards of Pharmacy
(Jay)

Lemrey “Al” Carter, PharmD, MS, RPh
Executive Director/Secretary
National Association of Boards of Pharmacy
(Al)

Timothy D. Fensky, RPh, DPh, FACA
President
National Association of Boards of Pharmacy
(Tim)

NACDS

Steven C. Anderson, FASAE, CAE, IOM
President & Chief Executive Officer
National Association of Chain Drug Stores
(Steve)

Rick Keyes
NACDS Chair of the Board
President and CEO, Meijer, Inc.
(Rick)

NCPA

Brian Caswell, RPh.
President
National Community Pharmacists Association
(Brian)

Douglas Hoey, RPh
CEO
National Community Pharmacists Association
(Doug)

PhRMA

Stephen J. Ubl
President & Chief Executive Officer
Pharmaceutical Research and
Manufacturers of America
(Steve)

USP

Ronald T. Piervincenzi, Ph.D.
Chief Executive Officer
United States Pharmacopeia
(Ron)

Susan C. Winckler, RPh, Esq.
USP Chief Volunteer Officer
CEO, Reagan-Udall Foundation, FDA
(Susan)

ATTENDEE PROFILES



Paul W. Abramowitz, Pharm.D., Sc.D. (Hon), FASHP

Chief Executive Officer

American Society of Health-System Pharmacists (ASHP)

Paul W. Abramowitz is the Chief Executive Officer of the American Society of Health-System Pharmacists (ASHP). Prior to joining ASHP in September 2011, Dr. Abramowitz worked in hospitals and health-systems for 34 years. He served as Associate Hospital Director for Professional Services and Chief Pharmacy Officer at the University of Iowa Hospitals and Clinics, and Professor at the University of Iowa College of Pharmacy. He also held prior positions as Director of Pharmacy and Associate Professor at the Medical College of Virginia and the University of Minnesota.

Dr. Abramowitz received a Bachelors Degree in Chemistry and Biology from Indiana University, a Bachelors Degree in Pharmacy from the University of Toledo, a Pharm.D. from the University of Michigan, and completed his residency at the University of Michigan Medical Center.

In addition to serving as Treasurer of ASHP from 2007-10 and as ASHP President in 1993-94, he chaired the Boards of: the ASHP Research and Education Foundation, the Iowa Board of Pharmacy, and the Iowa Statewide Poison Control Center.

Dr. Abramowitz has actively combined practice, teaching, and research throughout his career. He has lectured and published extensively focusing on: the effect that pharmacists have on improving outcomes of care and reducing costs; developing new care models; reducing adverse drug events; and expanding comprehensive medication management to the ambulatory setting.

He was a recipient of the John W. Webb Lecture Award in 2000 and the Harvey A.K. Whitney Lecture Award in 2009, health-system pharmacy's highest honor. In 1990, he received the Distinguished Alumni Award from the University of Toledo College of Pharmacy, in 2010, the Alumni Distinguished Lifetime Achievement Award from the University of Michigan College of Pharmacy, and in 2013 the Honorary Degree of Doctor of Science from the University of Toledo. In 2015, he was recognized as one of Washington's Trending Association Leaders by Bisnow.

Currently, Dr. Abramowitz serves on the Boards of the American Nurses Foundation, the Pharmacy Technician Certification Board and the GTMRx Institute. He also is a member of the National Steering Committee for Patient Safety of the Institute for Healthcare Improvement and a Professor-Emeritus at the University of Iowa.

ATTENDEE PROFILES



Steven C. Anderson, FASAE, CAE, IOM

President & Chief Executive Officer

National Association of Chain Drug Stores (NACDS)

Steven C. Anderson, FASAE, CAE, IOM is President and Chief Executive Officer of the National Association of Chain Drug Stores (NACDS), a position he assumed in 2007. He represents and is the chief spokesperson for an industry that has annual sales of more than \$1 trillion, employs more than 3.2 million individuals, and works with suppliers and other partners to help meet the health, wellness and daily needs of patients and consumers across America. Nearly all Americans (91%) live within five miles of a retail pharmacy.

Anderson also serves as Chairman of the NACDS Foundation, whose mission is to utilize and support education, research, and charitable involvement to help people improve their health and quality of life through an understanding of medication therapy and the importance of taking medications appropriately.

In 2020, Anderson was selected as a Fellow by the American Society of Association Executives (ASAE), joining only 268 other association industry professionals who have received this designation since the program's inception in 1986. The ASAE Fellows program is among ASAE's highest honors, recognizing Individuals who have made a significant impact on the association community through exemplary volunteer service and leadership, extraordinary accomplishments, and other major contributions to ASAE and the profession of association management.



Jack W. "Jay" Campbell IV, JD, RPh

Chair

National Association of Boards of Pharmacy (NABP)

Mr. Campbell, executive director of the North Carolina Board of Pharmacy, is serving as chairperson of the Executive Committee. Prior to this position, he served one-year terms as president, president-elect, and treasurer and a three-year term as an Executive Committee member (District 3). As an active member of NABP, Mr Campbell has made many contributions to the NABP District 3 meetings, and previously served as president of District 3 from 2008 to 2017. In addition, Mr Campbell has served on many of the Association's committees and task forces, including the Committee on Law Enforcement/ Legislation, the Committee on Resolutions, and the Task Force to Review and Recommend Revisions to the Controlled Substances Act. NABP awarded Mr Campbell the Lester E. Hosto Distinguished Service

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Award in 2013. Mr Campbell also teaches pharmacy law and ethics classes at three North Carolina universities. Mr Campbell earned his bachelor of science degree in pharmacy from the University of North Carolina at Chapel Hill and his juris doctor degree from Vanderbilt University School of Law.



Lemrey "Al" Carter, PharmD, MS, RPh

Executive Director/Secretary

National Association of Boards of Pharmacy (NABP)

Dr. Carter is the executive director of the National Association of Boards of Pharmacy® (NABP®) and the secretary of the Association's Executive Committee. NABP is an international organization whose membership includes the state boards of pharmacy in all 50 United States, the District of Columbia, Guam, Puerto Rico, the Virgin Islands, the Bahamas, and all 10 provincial pharmacy regulatory agencies in Canada.

The purpose of NABP is to: (1) assist the state boards of pharmacy in protecting the public health, (2) serve as an information and disciplinary clearinghouse for the interstate transfer of licensure among the state boards of pharmacy, and (3) provide model regulations in order to assist the state boards of pharmacy with the development of uniform practice, educational, and competency standards for the practice of pharmacy.

Dr. Carter currently serves as a governor of the Pharmacy Technician Certification Board (PTCB) Board of Directors and chair of the PTCB Certification Council. Over the years, he has provided expert witness testimony and consultation in the areas of pharmacy practice and regulation. Dr. Carter is a former member and chair of the Illinois Department of Financial and Professional Regulation, Division of Professional Regulation – State Board of Pharmacy. In addition to serving on the Board, he was appointed by the Illinois House of Representatives to serve two terms on the Illinois Collaborative Pharmaceutical Task Force.

Previously, Dr. Carter oversaw pharmacy operations and professional affairs in the community pharmacy setting. In this position, he was responsible for the day-to-day operations and pharmacy regulatory oversight of more than 9,200 pharmacies in the US as well as oversight, management, and execution of all commercial, Medicare Parts B and D, and state Medicaid plans.

Dr. Carter has served on numerous committees and task forces for pharmacy organizations, including as chair of the 2019 NABP Overview Task Force on Requirements for Pharmacy Technician Education, Practice Responsibilities, and Competence Assessment. He graduated from Xavier University of Louisiana, College of Pharmacy, with a doctor of pharmacy degree, and received his master of science degree with studies focused on pharmacy regulation and policy from the University of Florida.

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Brian Caswell, RPh.

President

National Community Pharmacists Association (NCPA)

Brian Caswell, President of Wolkar Drug in Baxter Springs, KS is a University of Kansas School of Pharmacy Graduate in 1987. He owns 4 stores in S.E. KS and S.W. MO and is the current President of the National Community Pharmacists Association (NCPA).

Mr. Caswell serves as a board member for NCPA's Innovation Center, the Kansas Pharmacy Foundation, is a past President of the Kansas Pharmacists Association and also serves as The Lead Network Facilitator and luminary for CPESN-KS. Brian and his wife, Gretchen, reside in Baxter Springs, KS.



Chester Davis, Jr.

President and CEO

Healthcare Distribution Alliance (HDA)

Chester "Chip" Davis, Jr., JD, is the President and Chief Executive Officer of Healthcare Distribution Alliance and President of the HDA Research Foundation. Mr. Davis joined HDA in March 2020 from the Association for Accessible Medicines (AAM), the nation's leading trade association for manufacturers of generic and biosimilar medicines, where he served as President and Chief Executive Officer since 2015. Mr. Davis oversees HDA's day-to-day operations and is responsible for ensuring that the organization's members have a strong advocacy voice in legislation, regulation and policy.

Prior to AAM, Mr. Davis held leadership roles at the Pharmaceutical Research and Manufacturers of America and AstraZeneca, where in 2007 he was recognized as one of the inaugural winners of the CEO Leadership Award.

Mr. Davis earned an undergraduate degree in Accounting from the University of Delaware, and a Juris Doctor from the University of Baltimore School of Law.

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Timothy D. Fensky, RPh, DPh, FACA

President

National Association of Boards of Pharmacy (NABP)

Mr. Fensky, a member of the Massachusetts Board of Registration in Pharmacy, automatically assumed the office of president at the conclusion of NABP's 116th Annual Meeting. Prior to the election, he served one-year terms as president-elect and treasurer and a two-year term as an Executive Committee member (District 1). As a member of NABP, Mr. Fensky has made many contributions to the NABP District 1 meetings and previously served as president of the Massachusetts Board. Mr. Fensky served on the Task Force on Best Practices for Veterinary Compounding and the Task Force on Pharmacist Prescriptive Authority. He currently represents NABP on the Pharmacy Compounding Advisory Committee to the United States Food and Drug Administration. Mr. Fensky is the pharmacy administrator at Bournewood Health Systems and the chief pharmacy officer at Sullivan's Health Care. Further, he is recognized as a full fellow for the American College of Apothecaries, and is an adjunct faculty member at both the Massachusetts College of Pharmacy and Health Sciences and Northeastern University, Bouvé College of Pharmacy and Health Sciences. Mr. Fensky earned his bachelor of science degree in pharmacy from Northeastern University, Bouvé College of Pharmacy and Health Sciences, and received an honorary doctor of pharmacy license from the Oklahoma State Board of Pharmacy.



Paul Gama

CHPA Chair of the Board

President – Personal Health Care

The Procter & Gamble Company

Paul leads P&G's global personal health care portfolio, including trusted brands such as Metamucil, Pepto-Bismol, Neurobion, Prilosec OTC and Vicks – currently the number one retail over-the-counter brand in the world. Prior to his global leadership role, Paul led P&G's North America PHC portfolio over the last three years, and has been key to P&G's improved business growth and innovation success.

Paul is among P&G's most experienced in the health care space having literally grown up in the business over a span of two decades. Paul joined P&G in 2017, bringing with him an impressive resume and track record of success at industry leaders such as Bayer, Novartis, and Reckitt Benckiser.

Originally from Canada, Paul received his Bachelor's degree at McMaster University, and his MBA from the University of Rochester. In addition to his responsibilities at P&G.

Paul and his wife Laurie have two children. In addition to spending time with his family he enjoys skiing, cycling, hiking and travelling.

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Douglas Hoey, RPh.

CEO

National Community Pharmacists Association (NCPA)

Brian Douglas (Doug) Hoey is the Chief Executive Officer of the National Community Pharmacists Association. The National Community Pharmacists Association represents the owners of more than 22,000 pharmacy small businesses. These pharmacies are important to local economies providing jobs for more than 250,000 people in their communities and consumers consistently rank them as the top rated pharmacies in the country.

Hoey is a licensed pharmacist in Oklahoma, Virginia, and Texas and practiced in community pharmacies including his own family's pharmacy before coming to NCPA. Hoey was NCPA's first Chief Operating Officer and in 2011 was named CEO. He is widely quoted by media as an industry expert on community pharmacy practice issues including drug supply and prescription drug pricing. Hoey also developed and taught pharmacology courses at George Washington University and Marymount universities. He is co-Chairman of the Board of Directors for Surescripts, Chairman of the NCPA Innovation Center, and vice-Chair for Community Pharmacy Enhanced Services-USA (CPESN-USA) Board of Managers, and is on the Board of the Stabler-Leadbeater Pharmacy Museum (Alexandria, VA) as well as advisory boards for several schools of pharmacy. His pharmacy degree is from the University of Oklahoma College of Pharmacy and his MBA is from the Oklahoma City University graduate school of business.



Thomas J. Johnson, Pharm.D., M.B.A., BCCCP, BCPS, FASHP, FCCM

President

American Society of Health-System Pharmacists (ASHP)

Thomas J. Johnson is Assistant Vice President of Hospital Pharmacy at Avera Health, in Sioux Falls, S.D. He has consistently championed advancing optimal patient outcomes through the progressive use of pharmacy staff within healthcare teams.

Tom earned his Pharm.D. from North Dakota State University (NDSU) and completed an ASHP-accredited residency at St. Alexius Medical Center/NDSU in Bismarck, N.D. He has served in multiple roles over his professional career including clinical practice, academia, research, and leadership.

Tom has served ASHP in multiple roles including Treasurer (2016–2019); Board of Directors (2011–2014); Council on Education and Workforce Development; Council on Therapeutics; Committee on

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Nominations; Task Force on Organizational Structure; Practitioner Recognition Committee; and as a state delegate for many years. Johnson is a Past President of the South Dakota Society of Health-System Pharmacists (SDSHP) and 2005 SDSHP Pharmacist of the Year. Currently Tom serves as ASHP President.



Rick Keyes

NACDS Chair of the Board
President and CEO, Meijer, Inc.

Rick Keyes is the President and CEO of Meijer, Inc., the family-owned and privately-held Grand Rapids, Mich.-based retailer that operates over 240 supercenters throughout Michigan, Ohio, Indiana, Illinois, Kentucky and Wisconsin. Rick joined Meijer in 1989 as a pharmacy team member in Columbus, Ohio, while attending college.

A 31-year Meijer veteran, Rick was appointed President in October 2015 and named the first non-Meijer family member CEO in January 2017 after holding various leadership positions in pharmacy and store operations, as well as supply chain and manufacturing. Rick is the 11th President in the history of the company that employs more than 70,000 team members across the Midwest.

As President and CEO, he oversees all day-to-day operations and works closely with Executive Chairman Hank Meijer in developing and executing growth strategies. These strategies include a strong focus on enhancing the customer experience, driving team member engagement, and maintaining a competitive focus in the fast-paced retail industry while staying true to the Meijer values.

Prior to his appointment as President and CEO, Rick served as Executive Vice President of Supply Chain and Manufacturing, a role he had held since 2006. Prior to that role, Rick spent 15 years in retail operations, starting in Pharmacy, and becoming a Store Director, Market Director and Regional Vice President.

Rick received his Bachelor of Science Pharmacy degree from Ohio Northern University, where he now serves as a member of the Board of Trustees. Additionally, he serves as Chair of the Board for the National Association of Chain Drug Stores, on the Ohio State University College of Pharmacy Dean's Corporate Council, Retail Industry Leaders Association Board, Business Leaders for Michigan Board, and the Coca-Cola Retailing Research Council.

ATTENDEE PROFILES



Scott Knoer, MS, PharmD, FASHP

Executive VP & CEO

American Pharmacists Association (APhA)

Scott Knoer, MS, PharmD, FASHP, is the 13th Executive Vice President and Chief Executive Officer of the American Pharmacists Association. He received his BA in psychology from Creighton University in 1988 and his PharmD from the University of Nebraska in 1996. He completed a 2-year administrative residency with a concurrent MS degree in hospital pharmacy from the University of Kansas in 1998.

Before his current leadership role at APhA, Dr. Knoer was the Chief Pharmacy Officer at the Cleveland Clinic from 2011 to 2020, where he led an international pharmacy enterprise with a \$1.4 billion dollar drug budget and 1,558 FTEs in 18 hospitals with facilities in Ohio, Florida, and Nevada; Toronto; London; and Abu Dhabi.

After graduation from pharmacy school, he was an Operations Manager at the University of Texas Medical Branch at Galveston for 3 years. Moving to Minnesota, he was the Director of Pharmacy at the University of Minnesota Medical Center, Fairview, for a decade before being recruited to the Cleveland Clinic in 2011.

Dr. Knoer has served the profession extensively through involvement in professional organizations at the local, state, and national levels. He is published widely on a variety of pharmacy and leadership topics. He is a frequent invited lecturer to state, national, and international audiences. He is often quoted as a health care expert on a broad array of topics in newspaper, radio, and television outlets.

Dr. Knoer is a passionate advocate for patients and the profession of pharmacy. He has successfully lobbied boards of pharmacy in Ohio and Minnesota to allow the advancement of pharmacy practice, and he has led initiatives that changed Ohio and federal law related to the elevation of pharmacy practice and reducing the impact of drug shortages.

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Sandra Leal, PharmD, MPH, CDCES, FAPhA

President-Elect

American Pharmacists Association (APhA)

Sandra Leal is the Executive Vice President for SinfoníaRx, A TRHC Solution. Dr. Leal is responsible for oversight and expansion of progressive pharmacists' services that focus on outcomes, access, and quality.

Dr. Leal received her PharmD from the University of Colorado and her MPH in Public Health Practice from the University of Massachusetts. Dr. Leal completed her residency at the Southern Arizona VA Health Care System and a Primary Health Care Policy Fellowship with the Department of Health and Human Services.

Her work has been published in Diabetes Care, Advances in Chronic Kidney Disease, American Journal of Health-System Pharmacy, Journal of the American Pharmacists Association, Annals of Internal Medicine and a discussion paper published by the Institute of Medicine entitled, "Patients and Health Care Teams Forging Effective Partnerships".

Her programs are a two-time recipient of the American Pharmacists Associations (APhA) Foundation Pinnacle Award, ASHP Best Practice Award in Health-System Pharmacy and the National Association of Community Health Centers Innovative Research in Primary Care Award. Dr. Leal was recognized as APhA's Good Government Pharmacist-of-the-Year for her advocacy work on pharmacist provider status and was installed as President-Elect for the American Pharmacists Association for the 2020-2022 term.

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Dan Leonard

President and CEO

Association for Accessible Medicines (AAM)

Dan Leonard is President and Chief Executive Officer of the Association for Accessible Medicines (AAM), the nation's trade association for the makers of generic and biosimilar medicines, which fill 9 out of 10 prescriptions in the United States. Appointed to the position by the AAM Board in summer 2020, Dan is responsible for ensuring the association fulfills its mission to improve the lives of patients and consumers by providing timely access to safe, effective and affordable medicines.

Prior to joining AAM, Dan served as president and chief executive officer of the National Pharmaceutical Council (NPC), which sponsors and conducts research on a number of critical health policy issues. NPC plays a leadership role in the evolving areas of value assessment, value-based contracting and the importance of maintaining a robust innovation ecosystem.

Before his tenure at NPC, Dan served as executive vice president of advocacy for America's Health Insurance Plans (AHIP), the trade association representing companies providing health insurance coverage in the United States.

Dan has significant experience in politics and government, including time spent with presidential campaigns, the National Republican Congressional Committee (NRCC) and as a chief of staff on Capitol Hill. Early in his career, Dan worked as a television broadcast journalist and held on-air and management positions at affiliates across the nation.

He has a bachelor's degree in journalism from Marietta College in Marietta, Ohio, where he currently serves on the Board of Trustees. Dan received a master's degree in government from Johns Hopkins University. He lives in Annapolis, Maryland, with his wife, Susan. They have two children and enjoy sailing on the Chesapeake Bay.

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Anne Lin, B.S., Pharm.D., FNAP

President

American Association of Colleges of Pharmacy (AACP)

Dr. Anne Lin is currently the Founding Dean & Professor of the School of Pharmacy at Notre Dame of Maryland University.

She graduated from St. John's University in 1984 with a Bachelor of Science degree in Pharmacy and in 1986 received a Doctor of Pharmacy degree from the same institution. In 1987 she completed a clinical pharmacy residency at Medical College of Virginia Hospital.

Dr. Lin began her professional career as a faculty member at her alma mater. In 1996, she assumed the position of founding chair of the department of pharmacy practice at Wilkes University's new school of pharmacy. Subsequently, in 2004 she moved to Arizona to serve as Dean of Midwestern University College of Pharmacy-Glendale.

Dr. Lin's interests are in the areas of curriculum development and the incorporation of interdisciplinary teaching, service learning, leadership development into curricula and the professionalization of students. Additionally, she is committed to the advancement of pharmacy practice. She is an active member of many professional organizations including American Association of Colleges of Pharmacy, American College of Clinical Pharmacy, American Society of Health-Systems Pharmacists, and American Pharmacist Association. Dr. Lin is currently President of the American Association of Colleges of Pharmacy.



Lucinda L. Maine, Ph.D., R.Ph.

Executive Vice President and CEO

American Association of Colleges of Pharmacy (AACP)

Lucinda L. Maine serves as executive vice president and CEO of the American Association of Colleges of Pharmacy. As the leading advocate for high quality pharmacy education, AACP works to develop strong academic scholars and leaders, to support excellent professional doctoral and postgraduate degree programs and to build relations with key constituency groups both inside and external to the profession of pharmacy.

Prior to assuming her current role in July 2002, Maine served as senior vice president for policy, planning and communications with the American Pharmacists Association (APhA).

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Maine is a pharmacy graduate of Auburn University and received her doctorate at the University of Minnesota. She served on the faculty at the University of Minnesota where she practiced in the field of geriatrics and was an associate dean at the Samford University School of Pharmacy.

Maine has been active in leadership roles in and out of the profession. Prior to joining the APhA staff she served as speaker of the APhA House of Delegates and as an APhA trustee. She currently serves on the Board of Directors for Research!America and is an Executive Committee member of the American Foundation for Pharmaceutical Education. She has been honored with several prestigious awards, including the University of Minnesota Outstanding Alumnus Award, the Linwood Tice Friend of APhA-ASP Award and the Gloria Niemeyer Francke Leadership Mentor Award from the American Pharmacists Association. In 2017 she was installed in the Alabama Pharmacy Hall of Fame. In March 2019, Lucinda received the Remington Honor Medal, the professions' highest honor presented annually by APhA.



Scott Melville, J.D.

President & Chief Executive Officer
Consumer Healthcare Products Association (CHPA)

Scott Melville is the president and chief executive officer of the Consumer Healthcare Products Association (CHPA) and leads the organization's efforts to empower self-care by preserving and expanding choice and availability of consumer healthcare products, including OTC medicines, dietary supplements, and consumer medical devices.

With a diverse background in pharmaceuticals, association management, public policy and law, Melville has advocated before Congress, the U.S. Food and Drug Administration, state legislative and regulatory bodies, and the media. Prior to joining CHPA, Melville served as senior vice president for government affairs and general counsel for the Healthcare Distribution Alliance (formerly HDMA), the national association representing pharmaceutical wholesale distributors. Previously, Melville served as an attorney and head of government relations for Cephalon, Inc., an international biopharmaceutical company, since acquired by TEVA Pharmaceuticals, and in public policy and government affairs positions at Hoffmann-La Roche and Sterling Winthrop, Inc. He is a former chair of the Pennsylvania Biotechnology Association. Prior to joining the pharmaceutical industry, Melville served as legislative counsel and Appropriations Committee associate on the staff of retired U.S. Congressman Jerry Lewis (R-Calif.).

Melville earned his bachelor's degree in economics and political science from Bucknell University, and his juris doctorate from George Mason University's Antonin Scalia School of Law. He serves on the boards of the Global Self-Care Federation and the CHPA Educational Foundation.

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Kathleen S. Pawlicki, M.S., R.Ph., FASHP

Immediate Past President

American Society of Health-System Pharmacists

Kathleen Pawlicki is currently serving as the immediate past president of ASHP. After earning her B.S. in pharmacy (Ferris State University), she completed an ASHP accredited residency and an M.S. in Pharmacy Administration (Wayne State University). During her practice career, Kathy has served in various pharmacy leadership positions in small, medium and large hospitals and has held faculty appointments at all three colleges of pharmacy in the state of Michigan. She was recognized as a Fellow of ASHP in 2001 and in 2018 was named the Michigan Pharmacist of the Year.

Throughout her career, Kathy has championed improved medication management by advancing pharmacists and technician roles at small, medium and large hospitals. She values continual advocacy for regulatory issues surrounding pharmacy practice through leadership in professional associations and as a member of the Michigan Board of Pharmacy. In her recent position as Vice President and Chief Pharmacist at Beaumont Health, an 8-hospital health-system in southeastern Michigan, Kathy was responsible for leading horizontal integration of pharmaceutical services throughout the health system in all care settings. Previous service to the profession includes various roles in pharmacy organizations, including President of both the regional and state societies for health-system pharmacy in Michigan, a delegate to the American Society of Health System Pharmacists (ASHP) House of Delegates and Chair of the Pharmacy Management Committee for the Michigan Hospital Association. She is a member of the ASHP Section of Pharmacy Practice Managers, previously serving as the Executive Committee Chair.

ATTENDEE PROFILES



Ronald T. Piervincenzi, Ph.D.

Chief Executive Officer
United States Pharmacopeia (USP)

Ronald T. Piervincenzi, Ph.D., has served as Chief Executive Officer of the United States Pharmacopeia since February 2014. Dr. Piervincenzi provides strategic leadership to USP's global staff of over 1,400 across sites in Rockville/USA, Brazil, China, Ghana, and India. His transformative vision has launched key USP initiatives in bringing quality across the healthcare spectrum, upholding USP's reputation as a quality leader since its founding in 1820. Under his leadership, USP has modernized its operations and launched innovative new science, including in the areas of digital medicine, cutting-edge manufacturing technologies and advanced biologics. USP is also better connecting to its stakeholders and customers through new initiatives including the Hyderabad Training Institute in India, the Quality Institute, and USP's new Impurities for Development service. Dr. Piervincenzi also provides oversight and leadership of USP's global public health initiatives, including sites in Ethiopia, Indonesia, Nigeria and the Philippines. Dr. Piervincenzi served as Chair of the Council of Experts, USP's scientific standards-setting body of 24 Expert Committees and over 750 standards-setting experts until June 2015, when he transferred this responsibility to USP's new Chief Science Officer.

Dr. Piervincenzi brings more than 20 years of industry experience across pharmaceutical sciences, research and business strategy. Before joining USP, Dr. Piervincenzi served as Vice President of Development Sciences with Biogen Idec, Inc., where he designed and launched Biogen's value-based medicine group focusing on applying tools and technologies of personalized medicine in the treatment and management of multiple sclerosis. Dr. Piervincenzi was a partner and leader in McKinsey & Company's global pharmaceutical and medical products practice for over 12 years. In this capacity, Dr. Piervincenzi launched McKinsey's global drug safety, medical and regulatory service line. With McKinsey, Dr. Piervincenzi also led the global research and information analytics team, managing staff in New Jersey, London, Brussels, and India.

Dr. Piervincenzi earned his M.S. and Ph.D. from Duke University in Biomedical Engineering, with research focused on protein engineering. He is the proud co-founder and chairman of the board for the Newark Mentoring Movement.

ATTENDEE PROFILES



Alok Sonig

AAM Board Chair

CEO, US Generics & Global Head R&D & Biosimilars, Lupin

Alok (Pron: Ah-Loke) Sonig is CEO, US Generics and Global Head, Generics R&D and Biosimilars of Lupin, Inc.

With over 23 years of experience in the pharmaceutical industry, Alok has previously served as the CEO of Developed Markets (U.S., Canada, Europe and Japan) at Dr. Reddy's Laboratories. Prior to Dr. Reddy's Laboratories, he spent over 15 years at Bristol-Myers Squibb, where he held several positions of increasing responsibilities in General Management, Global Strategy, and Marketing.

Alok holds a Bachelor's of Engineering from Punjab Engineering College in India and an MBA from American University in Washington, DC.



Linda S. Tyler, Pharm.D., FASHP

President-elect

American Society of Health-System Pharmacists (ASHP)

Linda S. Tyler, Pharm.D., FASHP, is the Chief Pharmacy Officer for University of Utah Health; Professor (Clinical), Department of Pharmacotherapy and Associate Dean for Pharmacy Practice, University of Utah College of Pharmacy. Tyler received her B.S. in Pharmacy and Pharm.D. degrees from the University of Utah. She completed a pharmacy practice residency at University of Nebraska Medical Center. She was a faculty member and critical care practitioner at the University of Wisconsin and a poison control center specialist at Nationwide Children's Hospital. She returned to the University of Utah as Director of Drug Information Services. She served in that role for many years before becoming the senior pharmacy leader for University of Utah Health. She is the residency program director for the HSPAL program. Tyler is a tireless advocate for progressive and innovative pharmacy services in health systems. Tyler has served ASHP in many capacities, most recently as a Board Member. She previously served as Chair of the Council on Pharmacy Management and as Director-at-Large of the Section of Clinical Specialists and Scientists Executive Committee. She has also served on the Councils on Organizational Affairs, Therapeutics, Education and Workforce Development, and Pharmacy Practice; the Committee on Nominations; Section of Ambulatory Care Practitioners; New Practitioner and Student Forums; and a delegate to the House of Delegates for several years. She is a Past President of USHP. Dr. Tyler was the 2015 recipient of the John Webb Award, given by ASHP in recognition of outstanding leadership.

ATTENDEE PROFILES



Stephen J. Ubl

President & Chief Executive Officer

Pharmaceutical Research and Manufacturers of America (PhRMA)

Stephen J. Ubl is president and chief executive officer of the Pharmaceutical Research and Manufacturers of America (PhRMA), which represents America's leading biopharmaceutical research companies. The biopharmaceutical sector directly employs more than 854,000 Americans, and invests more than \$70 billion in research and development every year -- more than any other industry in America. Mr. Ubl leads PhRMA's work preserving and strengthening a health care and economic environment that encourages medical innovation, new drug discovery and access to life-saving medicines. Ubl is recognized around the world as a leading health care advocate and policy expert who collaborates successfully with diverse stakeholder groups -- including patient and physician groups, regulators, public and private payers, and global trade organizations -- to help ensure timely patient access to innovative treatments and cures. "If anyone can find areas of agreement with the critics, or at least work productively with them, it may be Mr. Ubl," the New York Times' Robert Pear wrote in February 2016. "He is more conversant with the intricacies of health policy, and more adept at the politics."

As president and CEO of medical technology association AdvaMed, Ubl helped facilitate landmark reforms related to the U.S. Food and Drug Administration product review process and Medicare's coverage and reimbursement of medical technologies. He led the industry's defense of breakthrough R&D, successfully delaying an innovation-stifling device tax, and, in 2013, was recognized by a leading industry publication as one of 10 people to have a lasting impact on the medical technology industry.

Ubl has worked extensively with patient advocacy organizations in health policy, including longstanding service on the board of the National Health Council, a leading umbrella organization for voluntary health care organizations and has been personally involved with JDRF (formerly known as the Juvenile Diabetes Research Foundation).

He is routinely recognized as one of Washington's most effective advocates. For two years in a row, Ubl was named to Modern Healthcare's "100 Most Influential People in Healthcare," as a Top Lobbyist by The Hill and a top health influencer by Medical Marketing & Media and PR Week magazines.

Prior to AdvaMed, Ubl was vice president of legislation for the Federation of American Hospitals. He began his Washington career on Capitol Hill.

ATTENDEE PROFILES



Susan C. Winckler, RPh, Esq.

USP Chief Volunteer Officer
CEO, Reagan-Udall Foundation, FDA

Susan C. Winckler, RPh, Esq., is CEO of the Reagan-Udall Foundation for the Food and Drug Administration. The Foundation is the non-profit organization created by Congress to advance the mission of the FDA.

Prior to accepting the Foundation post in May of 2020, Ms. Winckler served as President of Leavitt Partners Solutions. As President and Chief Risk Management Officer for the Leavitt Partners family of businesses, Ms. Winckler advised corporate executives on policy and business matters. As CEO of the Food & Drug Law Institute, she provided attorneys, regulators, industry leaders, and consumers with a neutral forum to address domestic and global issues.

As FDA Chief of Staff from 2007-2009, Ms. Winckler managed the Commissioner's office; served as his/her senior staff adviser; analyzed policies; and represented FDA before myriad government and external stakeholders. She simultaneously led FDA's Offices of Legislation, External Relations, Public Affairs, and Executive Secretariat.

As APhA Vice President Policy/Communications and Staff Counsel, she served as the association's lead spokesperson and senior liaison to Congress, the executive branch, state associations, and allied groups. Ms. Winckler earned a BS from the University of Iowa College of Pharmacy and her JD magna cum laude from Georgetown University Law Center. She is an APhA Fellow, an elected member and Chair of the United States Pharmacopeial Convention (USP) Board of Trustees (2015-2020, 2020-2025), a member of the Purgo Scientific, LLC board, and a member of the Virginia Commonwealth University School of Pharmacy National Advisory Council.

ORGANIZATION MISSION STATEMENTS



American Association of Colleges of Pharmacy

Advance pharmacy education, research, scholarship, practice and service, in partnership with members and stakeholders, to improve health for all.



American Pharmacists Association

As the voice of pharmacy, the American Pharmacists Association leads the profession and equips members for their role as the medication expert in team-based, patient-centered care. APhA will accomplish this by:

- Advancing pharmacists' optimal roles in team-based, patient-centered care.
- Providing opportunities for professional development, recognition, differentiation, and leadership.
- Disseminating timely relevant information and state-of-the-art tools and resources.
- Raising societal awareness about the role of pharmacists as essential in patient care for optimal medication use.
- Creating unique opportunities for members to connect and share with peers across practice settings.



American Society of Health-System Pharmacists

ASHP's vision is that medication use will be optimal, safe, and effective for all people all of the time. ASHP serves as the collective voice of pharmacists who serve as patient care providers in hospitals, health systems, ambulatory clinics, and other healthcare settings spanning the full spectrum of medication use.



Association for Accessible Medicines

AAM works to ensure more generic and biosimilar medicines are more accessible to more people who need them.



Biotechnology Innovation Organization

To advance biotechnology innovation by promoting sound public policy and fostering collaboration, both locally and globally.

ORGANIZATION MISSION STATEMENTS



Consumer Healthcare Products Association

Empower self-care by preserving and expanding choice and availability of consumer healthcare products.



Healthcare Distribution Alliance

Protect patient safety and access to medicines through the safe and efficient distribution of healthcare products and services.

Create and exchange industry knowledge and best practices to enhance the value of the healthcare supply chain.

Advocate for standards, public policies and business processes that produce safe, innovative and cost-effective healthcare solutions.



National Association of Boards of Pharmacy

NABP is the independent, international, and impartial association that assists its member boards and jurisdictions for the purpose of protecting the public health.



National Association of Chain Drug Stores

NACDS advances a pro-patient and pro-pharmacy agenda. For the ultimate benefit of the consumers served by NACDS members, the mission of NACDS is to advance the interests and objectives of the chain community pharmacy industry, by fostering its growth and promoting its role as a provider of healthcare services and consumer products.

ORGANIZATION MISSION STATEMENTS



National Community Pharmacists Association

- We are dedicated to the continuing growth and prosperity of independent community pharmacy in the United States.
- We are the national pharmacy association representing the professional and proprietary interests of independent community pharmacists and will vigorously promote and defend those interests.
- We are committed to high-quality pharmacist care and to restoring, maintaining, and promoting the health and well-being of the public we serve.
- We believe in the inherent virtues of the American free enterprise system and will do all we can to ensure the ability of independent community pharmacists to compete in a free and fair marketplace.
- We value the right to petition the appropriate legislative and regulatory bodies to serve the needs of those we represent.
- We will utilize our resources to achieve these ends in an ethical and socially responsible manner.



Pharmaceutical Research and Manufacturers of America

Our mission is to conduct effective advocacy for public policies that encourage the discovery of important, new medicines for patients by biopharmaceutical research companies. To accomplish this mission, we are dedicated to achieving these goals in Washington, D.C. and across the country.



U.S. Pharmacopeia

To improve global health through public standards and related programs that help ensure the quality, safety, and benefit of medicines and foods.

ABOUT NCPO

The National Conference of Pharmaceutical Organizations (NCPO) collectively represents more than 300,000 pharmacy practitioners and pharmaceutical scientists, companies engaged in health care delivery, as well as pharmacy regulators and educators. These include:

- **143** schools of pharmacy accredited by the Accreditation Council for Pharmacy Education and more than 6,600 faculty, 63,800 students enrolled in professional programs and 5,800 individuals pursuing graduate study
- **62,000** practicing pharmacists, pharmaceutical scientists, student pharmacists, and pharmacy technicians across all healthcare settings
- **45,000** pharmacists, student pharmacists, and pharmacy technicians who serve as patient care providers in acute and ambulatory settings
- **45** companies representing the generics and biosimilars industry
- **1,227** biotechnology companies, academic institutions, state biotechnology centers and related organizations across the United States
- **235** manufacturers and marketers of over-the-counter (OTC) medicines and dietary supplements
- **193** primary pharmaceutical distributors linking the nation's pharmaceutical manufacturers and more than 200,000 pharmacies, hospitals, long-term care facilities, clinics and others nationwide
- **54** Boards of Pharmacy within the United States and its territories
- **1,057** retailers and suppliers within the chain community pharmacy industry
- **22,000** pharmacist owners, managers, and employees within independent community pharmacies
- **39** biopharmaceutical research companies devoted to discovering and developing medicines

** As of January 2020*

Member organizations are already battling the opioid crisis with significant resources and expertise. Efforts include education on effective pain management and treatment, medication- assisted treatment for substance use disorder, prevention and rescue, effective prescribing practices, alternative therapies, and voluntary medication take-back programs.

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The following was adapted from “Behind the NDTC Curtain”. The National Drug Trade Conference (NDTC) convened for its first meeting, in Washington, DC, on January 15, 1913. The meeting was held in the Willard Hotel.

The attendance at this first meeting consisted of delegates from five national groups: APhA (founded in 1852), Healthcare Distribution Management Association (founded in 1876 as the Western Wholesale Druggists' Association), the National Community Pharmacists Association (formerly the National Association of Retail Druggists, founded in 1898), the National Association of Manufacturers of Medicinal Products (founded in 1912), and the American Association of Pharmaceutical Chemists (founded in 1908). Invitations had also been extended to the American Medical Association, American Dental Association, and the American Veterinary Medical Association, but they were not represented.

The APhA resolution had specified that the proposed Conference should elect its own permanent officers and should not be conducted under the auspices of any specific group. Accordingly, the following officers were elected:

President

John C. Wallace (American Pharmaceutical Association)

First Vice President

Charles A. West (National Wholesale Druggists' Association)

Second Vice President

W. C. Anderson (National Association of Retail Druggists)

Third Vice President

W. C. Abbott (American Association of Pharmaceutical Chemists)

Secretary

Charles M. Woodruff (National Association of Manufacturers of Medicinal Products)

The minutes of this first meeting were printed in the *Journal of the American Pharmaceutical Association (JAPhA)*, Vol. 2, pp., 234–247 (1913). A second meeting of the Conference was held on April 9, 1913, and is reported in *JAPhA*, Vol. 2 pp. 628–634 (1913).

Through the years, the Conference reflected the growth and movement of the pharmacy profession and the pharmaceutical industry—welcoming new members, bidding others farewell, and witnessing the changes and mergers of still others:

- The Proprietary Association (founded in 1881 and known since 1999 as the Consumer Healthcare Products Association) was elected to membership in 1914.
- The American Conference of Pharmaceutical Faculties (founded in 1900 and known since 1925 as the American Association of Colleges of Pharmacy) joined in 1919, resigned in 1988, and rejoined in 1994.
- The National Association of Boards of Pharmacy (founded in 1904) joined in 1919, resigned in 1981, and rejoined in 1993.

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- The Federal Wholesale Druggists' Association (founded in 1916) joined in 1927. (Later, through a merge with the Pharmaceutical Distributors Association which, in 1984, merged with the Healthcare Distribution Management Association, a charter member.)
- The National Association of Chain Drug Stores (founded in 1933) joined in 1947.
- Two charter members, American Association of Pharmaceutical Chemists (name changed in 1921 to American Pharmaceutical Manufacturers Association) and the National Association of Manufacturers of Medicinal Products (name changed to American Drug Manufacturers Association in 1971 and merged in 1958 to form what is today the Pharmaceutical Research and Manufacturers of America (PhRMA)).
- The American Pharmaceutical Association, a charter member, resigned in 1975, and rejoined in 1984 (with its official re- election in 1985).
- The Cosmetic, Toiletry and Fragrance Association (founded in 1894) joined in 1985, but resigned in 2006.
- The American Society of Health-System Pharmacists (founded in 1942) joined in 1993.
- The National Association of Retail Druggists, also a charter member, changed its name to the National Community Pharmacists Association in 1996.
- The Generic Pharmaceutical Association (founded in 2001) joined in 2009.
- The Biotechnology Industry Association (founded in 1993) joined in 2010

The name of the Conference itself was part of the change dynamic, from the National Drug Trade Conference to the National Conference of Pharmaceutical Organizations in 1996.

In the first years of the Conference, there was a proposal for including associate members. Consideration was also given to forming a section for groups allied with the pharmaceutical industry and profession, but these proposals were not adopted. Likewise, newly formed interprofessional industry groups were not included because they were already represented in some capacity by being affiliated with one or more of the member groups.

Dr. James H. Beal was secretary of the APhA in 1912 at the time it adopted the resolution which led to the formation of the Conference. Dr. Beal was one of the outstanding leaders in pharmacy and for many years was identified with the enactment and administration of important laws — state and national — relating to pharmacy and to the distribution of drugs and medicines. After his death, his son, Dr. George D. Beal, supplied a quotation from his father's diary which gave the reasons for proposing the Conference.

"At meetings of the APhA, whenever a representative of any strong group presented a paper or a report, it was certain to be attacked by members of groups representing other interests. I felt that if those groups could be brought together in a place where they might have full and frank discussions, without being bound by other groups to any course of action, we might gradually compose conflicting views and abate jealousies.

Knowing the magic in the word 'conference,' I proposed such a session. Since there seemed to be nothing dangerous in coming together in the same room, it was discovered that professional questions could be discussed in good temper."

Dr. Beal had a precedent for his suggested conference. Dr. Hamilton Wright, of New York, had proposed a Federal Anti-Narcotic Law. It contained numerous features objectionable to pharmacists. One in particular

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was what community pharmacists considered an inordinate demand for the keeping of records. A conference committee, meeting with Dr. Wright and Congressman Burton Harrison (D-NY), found a solution in a provision for triplicate order forms.

The proposed federal law was to apply to interstate commerce while intrastate transactions were to be covered by the state. The practicing pharmacist, ordering from the manufacturer or wholesaler, would make out one original and two carbon copies. The original would be retained by the pharmacist in his records; one carbon would be retained by the wholesaler who filled the order; and the other would be filed with the federal official of the district.

The would-be complexities of interstate commerce and of enforcement at the intrastate level were thereby overcome. It was reported that Dr. Wright walked out of the room "in a huff," but Congressman Harrison said that as a businessman, he understood the objection to requiring multiple reports and records. Dr. James Beal reported:

"As Chairman, I went to the office of William Jennings Bryan, then Secretary of State, who gave me a letter to the Chairman of the Committee on Interstate Commerce, stating it was necessary to adopt this measure in order to comply with the obligation the United States had assumed with other nations to control the international traffic of narcotic drugs. When Dr. Wright saw that the measure was likely to become a law in spite of his opposition, he reversed his attitude and declared it was the kind of law he wanted."

The Journal of the American Pharmaceutical Association for 1913 reported the following on the first meeting of the Conference:

Anticipating difficulties due to supposedly conflicting interests, the delegates found to their surprise that the other representatives were quite ready to meet them halfway and to agree upon a basis of settlement fair to all. It was the first time in history that all branches met on a common ground and presented a united front. Why was such a Conference not founded years ago? This is the greatest thing that has been done for American pharmacy.

A less enthusiastic note was sounded at the 1914 Annual Meeting of the Conference, as reported in JAPhA.

Even if results were not as much as imagined, the good it has already accomplished amply justifies the action of the APhA in calling it together.

While discussions in early years at times questioned whether the Conference was serving its purposes, at the APhA 1919 convention, President Charles H. LaWall stated:

"The Conference continues to be worthy of our commendation and support. Limited as it is in effectiveness by the fact that its members cannot act for their respective organizations quickly in cases of emergency, it nevertheless is a successful experiment of its kind and is one of the strongest evidences of the need of that real federation for which many of us hope and which all of us will undoubtedly see."

Later the same year (1919), NARD (now NCPA) framed the matter in a different but still supportive light.

We believe that in the Conference we now have the nucleus of an organization which can do everything that the proposed federation of pharmacy had in mind to do, but perhaps in a little different way.

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To which JAPhA, in a November 1919 editorial, responded:

If the American Pharmaceutical Association cannot realize its vision of a federated pharmacy, let us have, by all means, the closest possible cooperation between APhA and NARD (now NCPA), but also with the state associations and with the national wholesale and manufacturing organizations, each caring for its own particular interests, in its own way, but each acting in harmony with the other bodies by means of conference committees.

Unanimous Consent Rule

From its inception, the Conference has adhered to the “unanimous consent rule.” That is to say: any motion, resolution, or other act which declares policy or commits the Conference, or any member of it, to a stated position or course of action must have the consent of all the members of the Conference. From time to time, one or more members have found the rule irksome and proposed its repeal. In 1918, five years after the Conference was organized, a motion was considered to give delegates the power to act promptly on any Conference motion predicated upon receiving approval by their respective Executive Committees. The APhA approved the motion; NARD opposed it; the others were lukewarm. In 1947, it was proposed that resolutions, instead of being dependent on unanimity, be passed by a two-thirds vote of the delegates in attendance. It was argued that such a procedure would speed action, would result in prompt dispatch of debated issues, would secure greater Conference prestige, and make Conference decisions binding on the members. In 1958 and 1974, discussions were held on changing the rule. But the Conference has held to the rule, and in so doing has remained truly a “conference,” not a caucus and not a legislative or judicial tribunal.

Conference Discussions and Accomplishments

From 1913 to the Great Depression of the '30s, some of the subjects considered at Conference meetings were:

1. modifying Treasury decisions to conform to the Harrison Anti-Narcotic Act
2. Drafting a bill to reform the patent system
3. Registration of drug names
4. “the granting of limited rights to sell certain drugs suitable to the best interests of the drug trade.” Other subjects considered were: sale of drugs by registered pharmacists only, substitution, caustic acid and poison label requirements, listing of potent and toxic drugs, study of habit-forming drugs, mailing of medicinal “poisons,” reporting complaints of alleged malfeasance on the part of food and drug inspectors, and the setting up of an Army Pharmacy Corps.

On the subject of requirements to render proprietary remedies safe for public consumption, the Conference adopted a resolution entitled “Incurable Diseases” which read:

Proprietary products are not to be advertised or recommended as a cure for those diseases which are generally recognized as incurable by the simple administration of drugs.

While the Conference had concerned itself with narcotics in the days of the Harrison Anti-Narcotic Act and with medicinal alcohol difficulties in the Prohibition Era, the New Deal brought new areas of concern. The demand for informative labeling, formula disclosure and regulation of advertising resulted in the introduction in the United States Senate of a bill to revise into the Pure Food and Drugs Act of 1906.

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The bill was introduced by Senator Royal S. Copeland of New York on June 6, 1933, and was referred to the Senate Committee on Commerce of which Senator Copeland was the Chairman.

The bill was officially designated as S.1944, but in common parlance it was called variously the "Copeland Bill," the "Tugwell Bill," or the "Tugwell-Copeland Bill." Dr Rexford Guy Tugwell was Assistant Secretary of Agriculture, and the proposal and the design for the new legislation was attributed to him.

NDTC took an active part in the hearings on S.1944, setting up a committee with Dr James Beal as chairman. The committee was instructed to oppose S.1944 as introduced and to advocate instead that new legislation be accomplished by amending the 1906 Act or redrafting S.1944.

The services of that committee should not be forgotten. It prepared a bill to amend the 1906 Act. Dr. Beal appeared before the Senate panel on the first day of the hearings, made a comprehensive statement on behalf of the Conference and submitted the bill for inclusion in the record. It appears, beginning on page 114 of the hearings on S.1944 in the 73rd Congress, Second Session.

The hearings began on December 7, 1933, the day which eight years later was to be "Pearl Harbor Day" and 26 years later the beginning of the Kefauver drug hearings. The presentation by Dr. Beal on behalf of NDTC aided greatly in finding for the entire drug field a course through the confusion which ensued upon the introduction of S.1944. The bill which was finally enacted in 1938 reflected the study, the discussion and the concessions of many interested parties, including NCPO. Following enactment of the 1938 Act, the Conference made a significant contribution in the preparation of a model State Food, Drug, and Cosmetic Act to achieve uniformity between the federal law with and among the states. This bill was prepared by a committee, chaired by Dr. Robert P. Fischelis, who at that time was secretary of the APhA. Other members of the committee were Charles Wesley Dunn, American Pharmaceutical Manufacturers Association, and James F. Hoge, Consumer Healthcare Products Association (then The Proprietary Association). Through many meetings and many drafts, its success was ultimately attested to by the general acceptance which the bill met in state legislatures, beginning with Indiana in 1949.

One of the most distinguished definitive accomplishments of NDTC was the creation of the American Foundation for Pharmaceutical Education. During the dark days of the Great Depression, the necessity of supporting the nation's colleges of pharmacy was recognized by the Conference. For five years, a Committee on Endowment headed by Dean Ernest Little (Rutgers University) studied the problem and emphasized the need for industry contributions. Out of these reports came the plan that, in 1942, led to the incorporation of the Foundation.

In 1956, the Conference participated in observance of the Fiftieth Anniversary of the Food and Drugs Act of 1906, commonly known as the Wiley Act. The year 1959 brought the beginning of the Kefauver hearings, which were of absorbing interest to all divisions of the drug trade and profession. They led to the 1962 amendments to the Federal Food, Drug, and Cosmetic Act which accomplished substantial revisions in the law, especially in regard to prescription drugs, "new drug" controls and efficacy requirements.

Other highlights of the 1950s included NDTC's work on uniform state bills such as a state barbiturates act, animal remedies act and state narcotic act. The NDTC Committee on Uniform State Legislation continued its work to keep the uniform state bills current into the 1960s.

During the 1960s, the Conference visited and revisited certain subjects: Medicare and government social service programs and their impact on record keeping; state regulation of interstate business and the need for uniform

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legislation; and drug abuse problems. Among other topics discussed were patent polices, personnel needs, and the Universal Drug Code.

In the '70s, conferees considered product coding on several occasions. National health insurance was an issue in the US Congress and was discussed at the Conference. Other kinds of third-party payment were discussed, including the impact of HMOs (health maintenance organizations) and MAC (maximum allowable cost) efforts. NDTC members considered the impact of government on the pharmaceutical field in other diverse areas such as labeling, recalls, the Food and Drug Administration's over-the-counter Drug Review, and the 1970 Poison Prevention Packaging Act. On the latter, the Conference approved a model state poison prevention packaging act in 1972.

After the 1982 tampering tragedies, NDTC focused on the issue of tamper-evident packaging also calling for legislation to make tampering a federal offense and reaffirming its support for stronger federal penalties concerning controlled substance crimes.

During the mid-1980s, the Conference looked at issues such as health care regulation, the pros and cons of a third class of drugs, and data sharing. A common feature of Annual Meetings, the "Roundtable," took on an even greater significance as volunteer leaders began presenting their associations' views.

In the latter half of the 1980s, the Conference focused its attention on the need for product liability reform by states and Congress, animal testing, the need for Congress to fully fund FDA as it performs its important regulatory functions, and the continuing need for a uniform national system of regulation for pharmaceutical and cosmetic products.

In 1988, more than 300 members of Congress, government officials, pharmacy leaders, and industry executives gathered in Washington to celebrate the 75th anniversary of the founding of the Conference. Highlighting the dinner was a 30-minute multimedia presentation of the history of the Conference, the national associations it represented, and the important role of pharmacy and pharmaceutical-related industries in America's future.

The shifting landscape of health care and health care reform were focuses of the early 1990s. In 1996 the Conference expressed its support for national uniformity in drug and cosmetic regulation in the context of FDA reform legislation.

At the turn of the 21st century, the transformation of health policies related to drug enforcement administration became the focus of the Conference.

Likewise, contemporary issues in particular, related to the Medicare Prescription Drug Benefit, Part D, workforce trends, and emergency drug preparedness, all became and continue to be major foci of the Conference. To this end, in June 2002, NCPO members collectively wrote the white paper titled, "A 21st Century System of Terrorism Defense." In light of the unfortunate anthrax attacks that followed September 11, 2001, this paper detailed the importance of the US pharmaceutical supply system as the cornerstone in the safe, accurate, and efficient delivery of large quantities of medicines and supplies to patients in times of national emergency.

In its most recent years, the Conference has taken on the modern issues of disruptive innovation, and ways in which the profession can transform pharmacy practice from a dispensing model to a patient care model, where new business models for ongoing pharmacist-delivered patient care services can be introduced, developed, sustained, and evaluated. Other key issues regarding the opportunities and challenges in demonstrating the value of prescription medicines in an era of cost containment; supply chain security from manufacturer to disposal; and reducing prescription drug abuse have also been Conference foci.

But more important than resolutions or the specific accomplishments of the Conference are the cooperative

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efforts among members fostered by the very presence of the Conference. This is no less true today than when Dr Beal called for the Conference over 100 years ago, where groups could come together for full and frank discussions without being bound to a Conference-mandated course of action.

The Enigma

The constituency of the Conference is representative of all sides of pharmacy. It is inclusive of the profession and trade, of manufacturing and distribution, and of teaching, dispensing, and caregiving. Therefore, it must reckon with subjects of disparate professional and trade interests. These have included academic concerns, economics of production and distribution, laws, and practices pertaining to fair trade, cooperative advertising, commercial practices and numerous other subjects.

Over the life of the Conference, some of these subjects have generated heat and acrimony. A characterization of one of the meetings might be applied to some of the others. The 1935 Annual Meeting was characterized by its having been said of the minutes of the Meeting that one might be more impressed by what was unsaid at the Meeting than by what was openly stated.

For historical interest, the question then at issue was that of endorsing the Kelly Bill, introduced in Congress following the demise of the NRA (National Recovery Act). The retail drug code had previously provided price floors, but these were now eliminated. Following a morning of debate, a conclusion was reached in the afternoon. The bill was not endorsed, but the principles underlying price stabilization were. Differences in professional and trade opinion were involved in such legislative proposals as the Durham-Humphrey and factory inspections amendments to the Federal Food, Drug, and Cosmetic Act. Consequently, they became subjects for protracted debate and discussion. But no subject revealed such differences of opinion and evoked such intense debate as the so-called “restrictive sales” argument. For example, older meeting minutes reflect much time and consideration on a proposed uniform pharmacy bill. The members found themselves in agreement on many of the provisions of such a bill but a Conference position was never attainable because of the “restrictive sales” issue. That issue, recurring at every Annual Meeting for several years, stymied the Conference by its consumption of time. The Conference wisely realized that its usefulness might be seriously impaired if this issue dominated each and every meeting.

The subjects of “substitution,” “duplication,” and “imitation” have been debated at many Conference meetings. While the minutes do not reveal general agreement on these subjects, nor do they always reveal definable progress toward a solution of problems, they do attest to the interest of the members and to their constructive aims and efforts.

In the minutes of an Annual Meeting of the Conference in the late ‘30s, there was this meaningful note with reference to a resolution of these subjects: “All favored the resolution in principle, but few gave it their unqualified approval.”

In the 1950s, increasing clamor for legislation probably accelerated the formation of the Health Information Foundation. Some questioned whether it and the National Pharmaceutical Council, which was organized in November 1953 and originally directed against substitution and imitation, represented a failure of the Conference to meet the subjects which brought these organizations into being.

These matters put strongly in focus such persistent questions as: “Is it the office of NCPO to meld trade and professional opinion?”

Can petty differences and personal animosities be overcome by the forum approach? Isn’t Conference discussion valuable to the field even when unanimity of opinion is unattainable?”

NCPO History

So it has been from time to time over the years that questions have arisen as to the place and service of the Conference. Therein has been the enigma. For, despite the differences and surviving all the questions, the Conference has gone on for more than 99 years, deriving vitality from the purpose of its founding.

As proposed by Dr James Beal, the Conference was to “compose conflicting views and abate jealousies.” The record may not show a full measure of accomplishment, but it does show a sustaining dedication to purpose and a sense of direction. And this it does in contemporary context of practical concern and experience.

Conclusion

Such are the historical origins of the Conference and a glimpse at some of its activities and achievements.

Like all records, this one relates only part of the story. The centrality of pharmaceutical agents and their use toward the quality of health care provided to patients will remain a major issue of the 21st century. Present days of change and challenge will, of course, bring new problems and demands to an industry and a profession related to such vital interests as the health of a nation and its people.

A meeting of minds may be more difficult than ever to achieve, but it is more important than ever. The Conference may serve the new day by providing opportunity for all segments of pharmacy to meet, to talk, and to listen in a common endeavor to unify and educate.

Change has become the constant for all of the domains represented in the NCPO. The rapidity and consequential nature of these changes requires open communication, coalition building, and forceful advocacy in a variety of sectors. Hopefully, the NCPO can continue to build on its tradition and serve eloquently as a platform for important dialogue.

Adapted from a presentation titled “Behind the NDTC Curtain,” made at the Conference’s Annual Meeting in Washington, DC, on December 3, 1954, by Ray C. Schlotterer, secretary. Revised in 1971 by James F. Hoge, counsel for the Consumer Healthcare Products Association, George B. Griffenhagen of the American Pharmaceutical Association, and Charles W. Bliven of the American Association of Colleges of Pharmacy.

Updated in 1976 by Mr. Griffenhagen, Arthur E. Schwarting, PhD, of the American Association of Colleges of Pharmacy, and James D. Cope of the Consumer Healthcare Products Association. Updated in 1983 by Mary F. Simons of the Consumer Healthcare Products Association. Updated in 1989 and revised in 1996 by Mr. Cope. Updated and revised in 2005 by Dr Henri Manasse, American Society of Health-System Pharmacists. Updated in 2013 by Dr Paul Abramowitz, American Society of Health-System Pharmacists.

NCPO MEETINGS

1913 through 1917

New Willard Hotel, Washington, D.C.

January 4, 1918

The Hotel Emerson, Baltimore, Maryland

September 25, 1918

The Southern Hotel, Baltimore, Maryland

January 7, 1919

The Hotel Emerson, Baltimore, Maryland

November 25, 1919

New Willard Hotel, Washington, D.C.

December 7, 1920

New Willard Hotel, Washington, D.C.

1921 through 1933

The Hotel Washington, Washington, D.C.

December 5, 1934

American Institute of Pharmacy, Washington, D.C.

December 6, 1935

(Information Not Available)

December 6, 1936

The Mayflower Hotel, Washington, D.C.

December 7, 1937

The Mayflower Hotel, Washington, D.C.

1938 through 1941

The Hotel Washington, Washington, D.C.

1942 through 1944

(Meeting cancelled due to World War II)

December 7, 1945

Hotel Statler, Washington, D.C.

November 8, 1946

Hotel Statler, Washington, D.C.

December 10, 1947

The Hotel Washington, Washington, D.C.

December 14, 1948

Hotel Statler, Washington, D.C.

December 2, 1949

Hay Adams House, Washington, D.C.

December 1, 1950

The Hotel Washington, Washington, D.C.

December 11, 1951

Gramercy Park Hotel, New York City

December 2, 1952

Gramercy Park Hotel, New York City

December 5, 1953

The Hotel Washington, Washington, D.C.

December 3, 1954

The Hotel Washington, Washington, D.C.

December 5, 1955

Hotel Biltmore, New York City

December 3, 1956

Gramercy Park Hotel, New York City

December 2, 1957

Gramercy Park Hotel, New York City

December 11, 1958

Gramercy Park Hotel, New York City

January 7, 1960

The Hotel Washington, Washington, D.C.

December 16, 1960

The Hotel Washington, Washington, D.C.

November 30, 1961

Savoy-Hilton, New York City

January 22, 1963

Sheraton-East Hotel, New York City

February 11, 1964

Edgewater Beach Hotel, Chicago, Illinois

March 5, 1965

University Club, New York City

February 25–26, 1966

The Homestead, Hot Springs, Virginia

January 11–13, 1967

Fontainebleau Hotel, Miami Beach, Florida

January 23–24, 1968

Holiday Inn, Freeport, Bahama Island

January 9–10, 1969

Camelback Inn, Scottsdale, Arizona

January 12–14, 1977

The Belview, Biltmore, Clearwater, Florida

NCPO MEETINGS

January 4-5, 1978

Marco Beach Hotel, Marco Island, Florida

January 12-14, 1977

The Belleview, Biltmore, Clearwater, Florida

January 4-5, 1978

Marco Beach Hotel, Marco Island, Florida

January 8-9, 1970

Americana Hotel, Bal Harbour, Florida

February 1-2, 1971

Marriott Hotel-Key Bridge, Washington, D.C.

January 13-14, 1972

Cerromar Beach Hotel, Dorado Beach, Puerto Rico

January 11-12, 1973

Diplomat Hotel, Hollywood, Florida

January 10-11, 1974

Holiday Inn, Montego Bay, Jamaica

January 8-10, 1975

Loews Paradise Island Hotel, Nassau, Bahama Islands

January 18-20, 1976

Mullet Bay Beach Hotel, St. Maarten, Netherlands Antilles

January 10-12, 1979

Sugar Bird Hotel, St. Thomas, U.S. Virgin Islands

January 9-11, 1980

Loews Paradise Island Hotel, Nassau, Bahama Islands

January 7-9, 1981

Rose Hall Intercontinental, Montego Bay, Jamaica

January 13-15, 1982

Paradise Beach Hotel, St. Michael, Barbados

January 5-7, 1983

Contadora Resort and Casino, Pearl Islands, Republic of Panama

January 11-18, 1984

American Aruba Hotel, Aruba, Netherlands Antilles

January 9-13, 1985

Royal St. Kitts Hotel & Casino, St. Kitts, West Indies

January 8-12, 1986

Sam Lord's Castle Resort, Barbados, West Indies

January 7-11, 1987

Hyatt Dorado Beach, Dorado, Puerto Rico

January 6-10, 1988

The Boulders, Carefree, Arizona

January 11-15, 1989

Stouffer Grand Beach Resort, U.S. Virgin Islands

January 11-13, 1990

Hyatt Regency, Grand Cayman, Cayman Islands

January 9-13, 1991

Hyatt Dorado Beach, Dorado, Puerto Rico

January 8-12, 1992

L'Habitation, St. Maarten, Netherlands Antilles

January 7-9, 1993

Hyatt Regency, Grand Cayman, Cayman Islands

January 6-8, 1994

Hyatt Dorado Beach, Dorado, Puerto Rico

January 4-7, 1995

Grand Palazzo Hotel, St. Thomas, U.S. Virgin Islands

January 8-11, 1997

Hyatt Dorado Beach, Dorado, Puerto Rico

January 3-6, 1996

Hyatt Regency, Grand Cayman, Cayman Islands

January 7-11, 1998

Westin Rio Mar Beach Hotel, Rio Grande, Puerto Rico

January 6-10, 1999

Hyatt Regency, Grand Cayman, Cayman Islands

January 5-9, 2000

El Conquistador Resort & Country Club, Fajardo, Puerto Rico

January 11-14, 2001

The Ritz-Carlton, St. Thomas, U.S. Virgin Islands

January 10-13, 2002

Hyatt Dorado Beach, Dorado, Puerto Rico

January 9-11, 2003

The Ritz-Carlton, St. Thomas, U.S. Virgin Islands

January 8-10, 2004

Hyatt Dorado Beach, Dorado, Puerto Rico

NCPO MEETINGS

January 5–8, 2005

The Ritz-Carlton, St. Thomas, U.S. Virgin Islands

January 5–7, 2006

Hyatt Regency Resort and Casino, Palm Beach, Aruba

January 4–6, 2007

The Ritz-Carlton, Grand Cayman, Cayman Islands

January 3–5, 2008

The Ritz-Carlton, St. Thomas, U.S. Virgin Islands

January 8–10, 2009

Four Seasons Resort Great Exuma at Emerald Bay,
Bahamas

January 7–9, 2010

The Ritz-Carlton, St. Thomas, U.S. Virgin Islands
(NACDS)

January 6–8, 2011

The Ritz-Carlton, Grand Cayman, Cayman Islands (HDA)

January 5–8, 2012

Caneel Bay Resort, St. John, U.S. Virgin Islands (APhA)

January 3–5, 2013

St. Regis Bahia Resort, Puerto Rico (PhRMA)

January 9–11, 2014

St. Regis Bahia Resort, Puerto Rico (ASHP)

January 8–10, 2015

St. Regis Bahia Resort, Puerto Rico (BIO)

January 7–9, 2016

Casa Marina, Key West, Florida (NCPA)

January 5–7, 2017

The Ritz-Carlton, Naples Beach Resort, Naples, Florida
(AAM)

January 4–6, 2018

The Ritz-Carlton, Naples Beach Resort, Naples Florida
(NABP)

January 3–5, 2019

Terranea, Rancho Palos Verdes, California (AACP)

January 2–4, 2020

The Resort at Pelican Hill, Newport Beach, California
(CHPA)

January 5–6, 2021

Virtual Meeting
(NACDS)