FEB 01 2019

BEFORE THE KANSAS STATE BOARD OF PHARMACY

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BOARD	OF. F	PHAF	RMACY

In the Matter of)	· · · · · · · · · · · · · · · · · · · ·	,
)	Case No	o. 19 - 020
Innovative Therapies, Inc. Facility Registration No. 16-44570)		
racinty Registration No. 10-44370)		

SUMMARY ORDER OF DENIAL

NOW on February _____, 2019, comes before the Kansas State Board of Pharmacy through its Executive Secretary (hereinafter referred to as the "Board") the matter of Innovative Therapies, Inc. (hereinafter referred to as "Respondent").

Pursuant to the authority granted to the Board by the Kansas Pharmacy Act, K.S.A. 65-1625, et seq., and in accordance with the provisions of the Kansas Administrative Procedure Act, K.S.A. 77-501, et seq., the Board enters this Summary Order of Denial in the above-captioned matter. After reviewing the renewal materials and being otherwise duly advised in the premises, the Board makes the following findings, conclusions, and order:

FINDINGS OF FACT

- 1. On or about March 1, 2018, the Board received Respondent's Durable Medical Equipment Registration Application for a change in address.
- 2. On March 1, 2018, the Board sent Respondent an email requesting certain information that was missing from Respondent's application.
- 3. On July 17, 2018, the Board sent Respondent a second email requesting the information that was missing from Respondent's application.
- 4. On July 20, 2018, the Board sent Respondent a final email requesting the information that was missing from Respondent's application.
 - 5. On August 15, 2018, the Board sent Respondent a letter requesting the information

that was missing from Respondent's application.

- 6. On September 19, 2018, the Board sent Respondent a final letter requesting the information that was missing from Respondent's application.
 - 7. To date, the Board has not received the requested documentation from Respondent.

CONCLUSIONS OF LAW

- 1. Pursuant to K.S.A. 65-1645(a), application for registration or permits under K.S.A. 65-1643, and amendments thereto, shall be made on a form prescribed and furnished by the Board. Applications for registration shall contain such information as may be required by the Board in accordance with the provisions of K.S.A. 65-1655, and amendments thereto, and K.S.A. 2017 Supp. 65-1655a and 65-1655b, and amendments thereto.
- 2. Pursuant to K.S.A. 65-1643(m), it shall be unlawful for any person to sell or lease or offer for sale or lease durable medical equipment without first obtaining a registration from the Board, in accordance with the rules and regulations adopted by the Board.
- 3. Respondent's failure to complete the application form with the required application information is a violation of K.S.A. 65-1645(a) and a basis to deny Respondent's application.

ORDER

Based upon the foregoing findings of fact and conclusions of law, Respondent's Durable Medical Equipment Registration Application is hereby DENIED.

NOTICES

Respondent is hereby notified as follows:

1. Respondent may request a hearing pursuant to the Kansas Administrative Procedure Act by filing a written request with the Kansas Board of Pharmacy, 800 SW Jackson, Suite 1414, Topeka, KS 66612-1231, within 15 days after service of this Order. If the outcome

of the hearing is adverse to Respondent, costs of the proceedings shall be charged to Respondent.

2. If a hearing is not requested as described above, the Summary Order shall become a final order of the Board, effective upon the expiration of the time to request a hearing.

3. Within 15 days after entry of a final agency order, either party may file a petition for reconsideration pursuant to K.S.A. 77-529.

4. Within the time limits established in K.S.A. 77-613, either party may seek judicial review of a final agency order, pursuant to K.S.A. 77-613. The agency officer designated to receive service of a petition for judicial review is:

Alexandra Blasi Executive Secretary Kansas Board of Pharmacy 800 SW Jackson, Suite 1414 Topeka, KS 66612

IT IS SO ORDERED.

2/1/9 Date

Alexandra Blasi, JD, MBA Executive Secretary

Kansas Board of Pharmacy

CERTIFICATE OF SERVICE

I hereby certify that I did, on February ______, 2019, deposit in the United States Mail, postage prepaid, a copy of the foregoing Summary Order of Denial, properly addressed to the following:

INNOVATIVE THERAPIES, INC. 3770 PARK CENTRAL BLVD NORTH POMPANO BEACH, FL 33064

Kansas Board of Pharmacy Staff