

Stefany Overbeck
License Number 13193

Date: December 21, 2020

Kevin Morgan, Pharm.D.
President, Maryland Board of Pharmacy
4201 Patterson Avenue
Baltimore, Maryland 21215

Re: Surrender of Pharmacist License
License No. 13193
Case No. 19-199

Dear Mr. Morgan and Members of the Board:

Please be advised that I have decided to **SURRENDER** my license to practice pharmacy in the State of Maryland, License Number 13193, effective upon acceptance of this letter by the Board Chair. I understand that I may not give pharmacy advice to any individual (with or without supervision and/or compensation), cannot dispense or administer drugs or assist in the dispensing or administration of drugs, and may not otherwise engage in the practice of pharmacy in Maryland, as it is defined in the Maryland Pharmacy Act (the "Act"), Md. Code Ann., Health Occ. § 12-101 *et seq.* (2014 Repl. Vol. & 2019 Supp.). Moreover, I may not represent myself to the public by title, abbreviation, sign, card, or other representation that I am licensed to practice pharmacy. In other words, as of the effective date of this Letter of Surrender, I understand that I am in the same position as an unlicensed individual.

I understand that this Letter of Surrender is a **PUBLIC DOCUMENT** and that upon the Board's acceptance and execution, this Letter of Surrender becomes a **FINAL ORDER** of the Maryland Board of Pharmacy (the "Board").

My decision to surrender my license to practice pharmacy in Maryland was prompted by a Notice of Intent to Revoke Pharmacy License ("Intent to Revoke") issued by the Board on July 20, 2020. The Intent to Revoke was based on my violation of a Board Consent Order which was executed September 19, 2019. In particular, the Intent to Revoke alleged the following:

1. On or about August 2, 2018, the Board received notification regarding theft of medication from the Pharmacy where I had been employed as a pharmacist. During the course of the Pharmacy's investigation, I provided a written statement admitting to stealing zolpidem, zaleplon and alprazolam from the Pharmacy for my own personal use over the course of two and a half years. I further admitted to concealing my theft by falsifying the quantities in the Pharmacy's computer system and the Pharmacy's ordering system.
2. On or about February 13, 2019, as a result of the theft from the Pharmacy, I was found guilty of one (1) count of CDS: Possession-Not Marijuana, in the District Court for Baltimore County, Maryland. After filing a *de novo* appeal, on or about July 19, 2019, I

was sentenced to one (1) year of incarceration with the entire term suspended, and was placed on supervised probation for eighteen (18) months, and ordered to pay a \$1,000 fine.

3. As a result of the theft and the subsequent conviction, effective September 19, 2019, I entered into a Consent Order with the Board. As part of the Consent Order, my license was suspended for a minimum of twenty-four (24) months beginning on March 12, 2019. During the suspension period, the Consent Order provided that I must satisfy several conditions, including but not limited to, submit to a substance abuse evaluation by a Board-approved qualified evaluator; follow any and all recommendations of the Board-approved qualified evaluator from the substance abuse evaluation; submit to random, Board-ordered enhanced drug and alcohol urine screenings and breathalyzer tests on a weekly basis; completely abstain from the ingestion of alcohol, unprescribed controlled dangerous substances ("CDS"), narcotics, illegal drugs and other mood-altering substances; provide a licensed health care provider with a copy of the Consent Order prior to accepting any CDS medication prescription, and then within 48 hours of being prescribed CDS, notify the Board.
4. Pursuant to the Consent Order, I was evaluated by the Board-approved qualified evaluator. The Evaluator submitted to the Board on December 10, 2019, the report of the evaluation ("Evaluation Report") with recommendations regarding monitoring, education, therapy, and limitations on her practice.
5. As part of the Evaluation Report, the Evaluator included information that supports the basis for a violation of § 12-313(b) (21) ("Is professionally, physically, or mentally incompetent").
6. I signed a contract with Pharmacy Rehabilitation Services ("PRS"), the entity the Board has contracted with for assistance in monitoring licensees with impairment issues on January 30, 2020. As part of the PRS contract, I agreed to comply with certain conditions, including but not limited to, random drug screens, see a PRS counselor on a monthly basis, and attend any follow up counseling that is recommended by PRS.
7. After signing the contract with PRS, PRS experienced an "ongoing lack of contact on the part of [me]." Therefore, PRS decided to close their case for me and refer the case back to the Board. Specifically, according to Monthly Monitoring Reports submitted to the Board by PRS, I failed to conduct any face to face or phone contacts, and failed to submit to any urine or hair follicle screens.

I have decided to surrender my pharmacy license to avoid further investigation and prosecution for violations of the Act. I acknowledge that if the case were to proceed to an evidentiary hearing, the Board would submit evidence to support the investigative findings that I violated the following provisions under the Act:

Health Occ. § 12-313. Denials, reprimands, suspensions, and revocations—
Grounds

....

- (b) *In general* – Subject to the hearing provisions of § 12-315 of this subtitle, the Board, on the affirmative vote of a majority of its members then

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serving, may deny a license to any applicant for a pharmacist's license, reprimand any licensee, place any licensee on probation, or suspend or revoke a license of a pharmacist if the applicant or licensee:

....

(21) Is professionally, physically, or mentally incompetent;

....

(25) Violates any rule or regulation adopted by the Board[.]

The pertinent provisions of Md. Code Regs ("COMAR"), 10.34.10 as follows:
COMAR 10.34.10.01. Patient Safety and Welfare.

....

B. A pharmacist may not:

....

(3) Engage in unprofessional conduct.

I acknowledge that for all purposes relevant to licensure, certification, and/or permit, these allegations and the Allegations of Fact in the Intent to Revoke will be treated as if proven.

I wish to make it clear that I have voluntarily, knowingly, and freely chosen to submit this Letter of Surrender to avoid further prosecution under the Act and to resolve this matter. I understand that by executing this Letter of Surrender, I am waiving any right to contest these findings or the Intent to Revoke in a formal evidentiary hearing at which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections provided by law, including the right to appeal.

I understand that the Board will advise the National Practitioner Data Bank of this Letter of Surrender and in response to any inquiry will advise that I have surrendered my license. I understand that this Letter of Surrender will be posted on the Board's website along with all other formal disciplinary actions. I understand that, in the event that I apply for licensure in any form in any other state or jurisdiction, this Letter of Surrender, and all underlying investigative documents, may be released by the Board to the same extent as a Final Order pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2014). Finally, I understand that this Letter of Surrender is considered disciplinary action by the Board.

I affirm that enclosed with this Letter of Surrender is my original Maryland pharmacist's license, number 13193, and my recent wallet-sized renewal card.

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Received

DEC 29 2020

Maryland Board
of Pharmacy

I further recognize and agree that by submitting this Letter of Surrender my license will remain surrendered unless and until I petition the Board for reinstatement; and I understand that when applying for a new Maryland license or when applying for reinstatement, I will approach the Board in the same posture as an individual whose license has been revoked based on the investigative findings contained herein as well as the Allegations of Fact in the Intent to Revoke, and that the Board has the sole discretion to accept or deny any application that I may submit.

I understand and agree that I must fulfill the following conditions before the Board may act upon any application for reinstatement of my Maryland license to practice pharmacy:

1. I may not apply for reinstatement until two (2) years after the effective date of this Letter – the date of its acceptance by the Board;
2. Prior to any possible reinstatement, I must submit to an evaluation by a Board-appointed evaluator, at my expense, to determine my fitness to practice; and
3. I must comply with the minimum licensure requirements for reinstatement, which may include fees, continuing education, and reexamination.

In the event that I apply for reinstatement to practice pharmacy, I fully understand that the Board has full discretion to grant or deny my application for reinstatement, even after my fulfillment of the above conditions. If the Board does grant my petition for reinstatement, I understand that the Board may set terms and conditions that shall apply to my receiving a reinstated Maryland license, including but not limited to a probationary period or limited practice settings. I also understand that if I petition for reinstatement I bear the burden of demonstrating to the Board that I am competent to practice pharmacy and possess good moral character, as specified in Md. Code Ann., Health Occ. §§ 12-302 and 12-310.

I acknowledge that I may not rescind this Letter of Surrender in part or in its entirety for any reason whatsoever. Finally, I wish to make clear that I have been advised I have the right to consult with an attorney before signing this Letter of Surrender and have been given an opportunity to do so. I fully understand the nature of both the Board's actions and this Letter of Surrender. I acknowledge that I understand and comprehend the language, meaning, and terms and effect of this Letter of Surrender. I make the decision to sign this Letter of Surrender knowingly and voluntarily and without duress.

I solemnly affirm under the penalties of perjury and upon personal knowledge that the contents of the foregoing Letter are true:


Stefany Overbeck

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NOTARY

STATE OF MARYLAND

COUNTY/CITY OF Baltimore

I HEREBY CERTIFY that on this 21 day of December, 2020, before me, a Notary Public of the State of Maryland and County/City aforesaid, personally appeared Stefany Overbeck, and made an oath in due form that the foregoing Letter of Surrender was her voluntary act and deed.

AS WITNESS my hand and Notarial seal.





Notary Public

My commission expires: October 5, 2024

ACCEPTANCE

On behalf of the Maryland Board of Pharmacy, on this 5th day of January, 2021, I accept Stefany Overbeck's **PUBLIC SURRENDER** of her license to practice pharmacy in the State of Maryland.


Kevin Morgan, Pharm.D.
President, Maryland Board of Pharmacy