

under section 823 of the Controlled Substances Act (hereinafter, CSA) “upon a finding that the registrant . . . has had his State license or registration suspended . . . [or] revoked . . . by competent State authority and is no longer authorized by State law to engage in the . . . dispensing of controlled substances.” With respect to a practitioner, the DEA has also long held that the possession of authority to dispense controlled substances under the laws of the state in which a practitioner engages in professional practice is a fundamental condition for obtaining and maintaining a practitioner’s registration. *See, e.g., James L. Hooper, M.D.*, 76 FR 71,371 (2011), *pet. for rev. denied*, 481 F. App’x 826 (4th Cir. 2012); *Frederick Marsh Blanton, M.D.*, 43 FR 27,616, 27,617 (1978).

This rule derives from the text of two provisions of the CSA. First, Congress defined the term “practitioner” to mean “a physician . . . or other person licensed, registered, or otherwise permitted, by . . . the jurisdiction in which he practices . . . , to distribute, dispense, . . . [or] administer . . . a controlled substance in the course of professional practice.” 21 U.S.C. 802(21). Second, in setting the requirements for obtaining a practitioner’s registration, Congress directed that “[t]he Attorney General shall register practitioners . . . if the applicant is authorized to dispense . . . controlled substances under the laws of the State in which he practices.” 21 U.S.C. 823(f). Because Congress has clearly mandated that a practitioner possess state authority in order to be deemed a practitioner under the CSA, the DEA has held repeatedly that revocation of a practitioner’s registration is the appropriate sanction whenever he is no longer authorized to dispense controlled substances under the laws of the state in which he practices. *See, e.g., James L. Hooper*, 76 FR at 71,371–72; *Sheran Arden Yeates, M.D.*, 71 FR 39,130, 39,131 (2006); *Dominick A. Ricci, M.D.*, 58 FR 51,104, 51,105 (1993); *Bobby Watts, M.D.*, 53 FR 11,919, 11,920 (1988); *Frederick Marsh Blanton*, 43 FR at 27,617.

According to Washington statute, “A practitioner may dispense or deliver a controlled substance to or for an individual or animal only for medical treatment or authorized research in the ordinary course of that practitioner’s profession.” Wash. Rev. Code § 69.50.308(j) (West, Westlaw current with effective legislation through Chapter 5 of the 2021 Regular Session of the Washington Legislature). Additionally, a “‘prescription’ means

an order for controlled substances issued by a practitioner duly authorized by law or rule in the state of Washington to prescribe controlled substances within the scope of his or her professional practice for a legitimate medical purpose.” Wash. Rev. Code § 69.50.101(nn) (West, Westlaw current with effective legislation through Chapter 5 of the 2021 Regular Session of the Washington Legislature). Further, “practitioner,” as defined by Washington statute, includes, “[a] physician under chapter 18.71 RCW.” *Id.* at 69.50.101(mm)(1).

Here, the undisputed evidence in the record is that Registrant currently lacks authority to practice medicine in Washington. As already discussed, a physician must be a licensed practitioner to dispense or prescribe a controlled substance in Washington. Thus, because Registrant lacks authority to practice medicine in Washington and, therefore, is not authorized to handle controlled substances in Washington, Registrant is not eligible to maintain a DEA registration. Accordingly, I will order that Registrant’s DEA registration be revoked.

Order

Pursuant to 28 CFR 0.100(b) and the authority vested in me by 21 U.S.C. 824(a), I hereby revoke DEA Certificate of Registration No. FN1977290 issued to Eric R. Shibley. Further, pursuant to 28 CFR 0.100(b) and the authority vested in me by 21 U.S.C. 823(f), I hereby deny any pending application of Eric R. Shibley to renew or modify this registration, as well as any other application of Eric R. Shibley, for additional registration in Washington. This Order is effective April 30, 2021.

D. Christopher Evans,

Acting Administrator.

[FR Doc. 2021–06582 Filed 3–30–21; 8:45 am]

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DEPARTMENT OF JUSTICE

Drug Enforcement Administration

[Docket No. 21–4]

Roozbeh Badii, M.D.; Decision and Order

On October 15, 2020, the Assistant Administrator, Diversion Control Division, Drug Enforcement Administration (hereinafter, DEA or Government), issued an Order to Show Cause (hereinafter, OSC) to Roozbeh Badii, M.D. (hereinafter, Respondent) of McLean, Virginia. OSC, at 1. The OSC proposed the revocation of

Respondent’s Certificate of Registration No. FB0526307. It alleged that Respondent is without “authority to handle controlled substances in the State of Virginia, the state in which [Respondent is] registered with the DEA.” *Id.* at 2. (citing 21 U.S.C. 824(a)(3)).

Specifically, the OSC alleged that the Virginia Department of Health Professions (hereinafter, VDHP) issued an Order of Mandatory Suspension on May 12, 2020. OSC, at 2. This Order, according to the OSC, immediately suspended Respondent’s Virginia state medical license. *Id.* “The VDHP ruling was issued following its finding, *inter alia*, of a prior ruling by the Maryland State Board of Physicians suspending [Respondent’s] medical license in that state.” *Id.*

The OSC notified Respondent of the right to request a hearing on the allegations or to submit a written statement, while waiving the right to a hearing, the procedures for electing each option, and the consequences for failing to elect either option. *Id.* (citing 21 CFR 1301.43). The OSC also notified Respondent of the opportunity to submit a corrective action plan. OSC, at 3. (citing 21 U.S.C. 824(c)(2)(C)).

By letter dated November 19, 2020, Respondent timely requested a hearing.¹ Hearing Request, at 1. According to the Hearing Request, Respondent’s Virginia medical license was suspended because the board of medicine in the state of Maryland believed that Dr. Badii practiced medicine while being impaired psychologically and the state of Virginia, “simply rubber stamped the findings of the state of Maryland.” *Id.* Respondent’s Hearing Request also claimed that “other states do not consider him currently impaired in any capacity,” and that Respondent wanted the opportunity to “prove that he is mentally healthy and no current threat to his patients.” Hearing Request, at 1 and 2.

The Office of Administrative Law Judges put the matter on the docket and assigned it to Chief Administrative Law Judge John J. Mulrooney II (hereinafter, the Chief ALJ). The Chief ALJ issued an Order and Briefing Schedule dated November 23, 2020. The Government timely complied with the Briefing Schedule by filing a Motion for Summary Disposition (hereinafter, MSD) on December 2, 2020. Order

¹ The Hearing Request was filed on November 20, 2020. Order and Briefing Schedule, dated November 23, 2020, at 1. I find that the Government’s service of the OSC on October 26, 2020, was adequate and that the Hearing Request was timely filed on November 20, 2020. *See also* Recommended Decision, at n.1.

Granting Summary Disposition and Recommended Rulings, Findings of Fact, Conclusions of Law, and Decision dated December 15, 2020 (hereinafter, Recommended Decision or RD), at 2. In its motion, the Government stated that Respondent lacks authority to handle controlled substances in Virginia, the state in which he is registered with the DEA and argued that, therefore, DEA must revoke his registration. MSD, at 1–2. The Respondent filed his response, “Respondent’s Reply Brief” (hereinafter, Respondent’s Reply), on December 14, 2020, in which he stated that “[i]n the states where he has no medical license, he is not allowed to prescribe medications to patients in those states. This would include Maryland and Virginia.” Reply Brief, at 3. Therefore, he argued that DEA permit him to “transfer the DEA application process to California,” where he has an active medical license. *Id.*

The Chief ALJ granted the Government MSD finding that “the Government has shown that the Respondent does not currently have authority to practice medicine in Virginia,” and that because “the Respondent does not have authority as a practitioner in Virginia, there is no other fact of consequence for this tribunal to decide in order to determine whether or not he is entitled to hold a [Certificate of Registration].” RD, at 5. The Chief ALJ recommended that Respondent’s DEA Certificate of Registration be revoked based on his lack of state authority. RD, at 6. By letter dated January 12, 2021, the Chief ALJ certified and transmitted the record to me for final Agency action. In that letter, the Chief ALJ advised that neither party filed exceptions.

I issue this Decision and Order based on the entire record before me. 21 CFR 1301.43(e). I make the following findings of fact.

Findings of Fact

Respondent’s DEA Registration

Respondent is registered with DEA under DEA Certification of Registration number FB0526307 at the registered address of 6193 Adeline Court, McLean, Virginia 22101. MSD, at Exhibit 1. Pursuant to this registration, Respondent is authorized to dispense controlled substances in schedules II through V as a practitioner. *Id.* Respondent’s registration “is in an active pending status until the resolution of administrative proceedings.” MSD, Exhibit 2 (Certification of Registration History).

The Status of Respondent’s State License

On May 12, 2020, the VDHP issued an Order of Mandatory Suspension. *Id.* The VDHP ruling was issued following its finding of a prior ruling by the Maryland State Board of Physicians suspending Respondent’s medical license in that state. MSD Exhibit 3 (VDHP Order of Mandatory Suspension).

According to Virginia’s online records, of which I take official notice, Respondent’s license is still suspended.² Virginia Department of Health Professions License Lookup, <https://dhp.virginiainteractive.org/Lookup> (last visited date of signature of this Order). Virginia’s online records show that Respondent’s medical license remains suspended. *Id.*

Accordingly, I find that Respondent currently is neither licensed to engage in the practice of medicine in Virginia, the state in which Respondent is registered with the DEA.

Discussion

Pursuant to 21 U.S.C. 824(a)(3), the Attorney General is authorized to suspend or revoke a registration issued under section 823 of the CSA “upon a finding that the registrant . . . has had his State license or registration suspended . . . [or] revoked . . . by competent State authority and is no longer authorized by State law to engage in the . . . dispensing of controlled substances.” With respect to a practitioner, the DEA has also long held that the possession of authority to dispense controlled substances under the laws of the state in which a practitioner engages in professional practice is a fundamental condition for obtaining and maintaining a practitioner’s registration. *See, e.g., James L. Hooper, M.D.*, 76 FR 71,371 (2011), *pet. for rev. denied*, 481 F. App’x 826 (4th Cir. 2012); *Frederick Marsh Blanton, M.D.*, 43 FR 27,616, 27,617 (1978).

² Under the Administrative Procedure Act, an agency “may take official notice of facts at any stage in a proceeding—even in the final decision.” United States Department of Justice, Attorney General’s Manual on the Administrative Procedure Act 80 (1947) (Wm. W. Gaunt & Sons, Inc., Reprint 1979). Pursuant to 5 U.S.C. 556(e), “[w]hen an agency decision rests on official notice of a material fact not appearing in the evidence in the record, a party is entitled, on timely request, to an opportunity to show the contrary.” Accordingly, Respondent may dispute my finding by filing a properly supported motion for reconsideration of findings of fact within fifteen calendar days of the date of this Order. Any such motion and response shall be filed and served by email to the other party and to Office of the Administrator, Drug Enforcement Administration at dea.addo.attorneys@dea.usdoj.gov.

This rule derives from the text of two provisions of the CSA. First, Congress defined the term “practitioner” to mean “a physician . . . or other person licensed, registered, or otherwise permitted, by . . . the jurisdiction in which he practices . . . , to distribute, dispense, . . . [or] administer . . . a controlled substance in the course of professional practice.” 21 U.S.C. 802(21). Second, in setting the requirements for obtaining a practitioner’s registration, Congress directed that “[t]he Attorney General shall register practitioners . . . if the applicant is authorized to dispense . . . controlled substances under the laws of the State in which he practices.” 21 U.S.C. 823(f). Because Congress has clearly mandated that a practitioner possess state authority in order to be deemed a practitioner under the CSA, the DEA has held repeatedly that revocation of a practitioner’s registration is the appropriate sanction whenever he is no longer authorized to dispense controlled substances under the laws of the state in which he practices. *See, e.g., James L. Hooper*, 76 FR at 71,371–72; *Sheran Arden Yeates, M.D.*, 71 FR 39,130, 39,131 (2006); *Dominick A. Ricci, M.D.*, 58 FR 51,104, 51,105 (1993); *Bobby Watts, M.D.*, 53 FR 11,919, 11,920 (1988); *Frederick Marsh Blanton*, 43 FR at 27,617.

Respondent argued that because he holds an active medical license in California, he should be able to transfer his DEA registration in Virginia to that state and avoid revocation. I agree with the Chief ALJ that “as has been long established by Agency precedent, state licensure in a state other than a respondent’s COR registration state is irrelevant to a DEA enforcement proceeding.” RD, at 4 (citing *Craig K. Alhanati, D.D.S.*, 62 FR 32,658, 32,658 (1997)).

Respondent is no longer currently authorized to dispense controlled substances in the Commonwealth of Virginia, the state in which he is registered. Specifically, the Virginia Board of Medicine’s decision to suspend Respondent’s medical license also means that Respondent is currently without authority to dispense controlled substances under the laws of Virginia. *See, e.g., Va. Code Ann. §§ 54.1–2409.1* (2021) (felony to prescribe controlled substances without a current valid license); 54.1–2900 (2021); 54.1–3401 (2021).

Here, the undisputed evidence in the record is that Respondent currently lacks authority to practice medicine in Virginia. As already discussed, a physician must be a licensed practitioner to dispense a controlled

substance in Virginia. Thus, because Respondent lacks authority to practice medicine in Virginia and, therefore, is not authorized to handle controlled substances in Virginia, Respondent is not eligible to maintain a DEA registration. Accordingly, I will order that Respondent's DEA registration be revoked.

Order

Pursuant to 28 CFR 0.100(b) and the authority vested in me by 21 U.S.C. 824(a), I hereby revoke DEA Certificate of Registration No. FB0526307 issued to Roozbeh Badii. Further, pursuant to 28 CFR 0.100(b) and the authority vested in me by 21 U.S.C. 823(f), I hereby deny any pending application of Roozbeh Badii to renew or modify this registration, as well as any other application of Roozbeh Badii, for additional registration in Virginia. This Order is effective April 30, 2021.

D. Christopher Evans,

Acting Administrator.

[FR Doc. 2021-06584 Filed 3-30-21; 8:45 am]

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DEPARTMENT OF JUSTICE

[OMB Number 1121-0309]

Agency Information Collection Activities; Proposed eCollection eComments Requested; Extension of a Currently Approved Collection: International Terrorism Victim Expense Reimbursement Program Application

AGENCY: Office for Victims of Crime, Department of Justice.

ACTION: 30 Day notice.

SUMMARY: The Department of Justice (DOJ), Office of Justice Programs, Office for Victims of Crime, will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The proposed information collection is published to obtain comments from the public and affected agencies.

DATES: The Department of Justice encourages public comment and will accept input until April 30, 2021.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

SUPPLEMENTARY INFORMATION: Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the Office for Victims of Crime, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Evaluate whether and if so how the quality, utility, and clarity of the information to be collected can be enhanced; and
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Overview of This Information Collection

1. Type of Information Collection:

Extension of a currently approved collection

2. The Title of the Form/Collection:

International Terrorism Victim Expense Reimbursement Program (ITVERP) Application

3. The agency form number, if any, and the applicable component of the Department sponsoring the collection:

There is no agency form number for this collection. The applicable component within the Department of Justice is the Department of Justice is the Office for Victims of Crime, in the Office of Justice Programs.

4. *Affected public who will be asked or required to respond, as well as a brief abstract:* Primary: Individuals victims, surviving family members or personal representatives. Other: Federal Government. This application will be used to apply for the expense reimbursement by U.S. nationals and U.S. Government employees who are victims of acts of international terrorism that occur(ed) outside of the United States. The application will be used to collect necessary information on the expenses incurred by the applicant, as associated with his or her victimization, and will be used by OVC to make an award determination.

5. *An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond:* It is estimated that 100 respondents will complete the certification in approximately 45 minutes.

6. *An estimate of the total public burden (in hours) associated with the collection:* The estimated total public burden associated with this collection is 75 hours.

If additional information is required contact: Melody Braswell, Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Two Constitution Square, 145 N Street NE, 3E.405A, Washington, DC 20530.

Dated: March 26, 2021.

Melody Braswell,

Department Clearance Officer for PRA, U.S. Department of Justice.

[FR Doc. 2021-06585 Filed 3-30-21; 8:45 am]

BILLING CODE 4410-18-P

DEPARTMENT OF LABOR

Employee Benefits Security Administration

Agency Information Collection Activities; Announcement of OMB Approvals

AGENCY: Employee Benefits Security Administration, Department of Labor.

ACTION: Notice.

SUMMARY: The Employee Benefits Security Administration (EBSA) announces that the Office of Management and Budget (OMB) has approved certain collections of information, listed in the Supplementary Information section below, following EBSA's submission of requests for such approvals under the Paperwork Reduction Act of 1995 (PRA). This notice describes the approved or re-approved information collections and provides their OMB control numbers and current expiration dates as required by the PRA.

FOR FURTHER INFORMATION CONTACT: G. Christopher Cosby, Office of Regulations and Interpretations, Employee Benefits Security Administration, U.S. Department of Labor, 200 Constitution Avenue NW, Room N-5718, Washington, DC 20210. Telephone: (202) 693-8425 (this is not a toll-free number); Email: cosby.chris@dol.gov.

SUPPLEMENTARY INFORMATION: The PRA and its implementing regulations require Federal agencies to display OMB